CITY OF WILLARD, OHIO PORTABLE TOILETS

DATE:		
LOCATION OF PROPOSED POF	RTABLE TOILET:	
PROPERTY OWNER:		APPLICANT (IF DIFFERENT):
NAME:		NAME:
ADDRESS:		ADDRESS:
PHONE:		PHONE:
PORTABLE TOILET DESCRIPTION		USE ONE FORM PER LOCATION
PURPOSE / EVENT: CITY, SCHOOL DISTRICT, COUNTY, OR STATE PROPERTY / EVENT CIVIC OR CHURCH PERMITTED EVENT PERMITTED CONSTRUCTION SITE RESIDENTIAL (MAXIMUM 2 DAY PERIOD)		OUNTY, OR STATE PROPERTY / EVENT
		TED EVENT
		ON SITE
		2 DAY PERIOD)
□ отп	HER:	
LENGTH OF USE: TEMPO	RARY (≤ 7 DAYS) □ L	ONG TERM (> 7 DAYS)
CONSTRUCTION: PRIVATELY/SELF MANUFACTURED COMMERCIALLY PRODUCED UNIT		
☐ YES ☐ NO MAINTENANCE REQUIREMENT: MUST BE MAINTAINED IN GOOD WORKING CONDITION FREE OF		
UNIT 10' FROM ADJACENT PROP NEIGHBORS HOUSE IF PRACTICAL	ERTY LINES; IN RESIDENTI. L; LONG TERM USE MUST I IN USE MUST BE SECURE	BLE TO LATCH SECURELY; TEMPORARY USES MUST PLACE AL AREAS TOILETS SHOULD BE LOCATED OUT OF SITE OF HAVE CONTRACT TO REGULARLY DISPOSE OF WASTE AND ED TO PREVENT USE IN A DANGEROUS OR INAPPROPRIATE
ATTACHED SITE PLAN. (: ATTACHED DISPOSAL AN		TABLE TOILET FROM RIGHT OF WAY / PROPERTY LINES) TRACT IF LONG TERM
APPLICANTS SIGNATURE:		
PRINTED NAME:		
APPROVED BY:		
CITY MANAGER		PUBLIC WORKS