**Cavan County Council**

**Chomhairle Chontae on Chabháin**

**APPLICATION FOR A SKIP.**

Telephone No. (049) 4378600

Applicant’s Name and Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Tel.No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail Address (If Any)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Address of Person Acting on behalf of Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Tel.No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail Address (If Any)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Address to which Correspondence is to be sent\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Description of proposed development \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Location, Townland or Postal Address of proposed development (as may be appropriate)

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Location of the skip.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Do you agree to the following terms & conditions:

* The skip will be properly secured,
* Safe passage will be left for pedestrians along existing footpath,
* The skip shall be positioned on the side of the street and not on an existing footpath.
* Adequate public lighting shall be provided during lighting up hours,
* You make good any damage to the public road or footpath arising from the work,
* A traffic hazard is not created due to the location of the skip and the work being carried out.
* The skip is left in position for the minimum time necessary to carry out the work,
* All light/loose material must be secured within the skip.
* The street and footpath must be maintained free of materials being deposited into the skip.
* On removal of the skip any rubbish left on the surrounding ground must be cleared away.
* Applicant must indemnify Cavan Co. Council against all risks pertaining to the skip & all materials associated with it.
* An administration fee of €10.00 should be paid per week or any day thereof.
* Additionally, should the skip be positioned in 1 or more car-parking spaces, a fee of €10 per space per week or any day thereof, will also apply.

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| Yes |  |  | No |  |

The Date the skip will be in use: From\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ to \_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_.

This is a total period of \_\_\_\_\_\_\_\_\_\_\_week(s).

(a) Administration fee for this application €\_\_\_\_\_\_\_\_\_\_. (No. of weeks or part thereof x €10)

(b) Occupied Parking Space fee €\_\_\_\_\_\_\_\_\_\_. (No of parking spaces occupied in that period x€10 per week)

**TOTAL FEE** (a) + (b)  **€\_\_\_\_\_\_\_\_\_\_**

I hereby apply to Cavan County Council for a skip at the above-mentioned Development/ Location.

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| SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| **FOR OFFICIAL USE ONLY**  DATE OF RECEIPT OF THIS APPLICATION \_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_ .  AMOUNT OF FEE RECEIVED €\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  RECEIPT NO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **PLEASE NOTE THAT ALL INVALID APPLICATIONS WILL BE RETURNED**. |