

### Comhairle Chontae na Mí

Teach Buvinda, Bóthar Átha Cliath, An Uaimh,  
Contae na Mí, C15 Y291

Fón: 046 – 9097000/Fax: 046 – 9097001

R-phost: customerservice@meathcoco.ie

Web: www.meath.ie

Uimhir Chláraithe: 00172770



### Meath County Council

Buvinda House, Dublin Road, Navan,  
Co. Meath, C15 Y291

Tel: 046 – 9097000/Fax: 046 – 9097001

E-mail: customerservice@meathcoco.ie

Web: www.meath.ie

Registration No.: 00172770

## Application Form to place a **Skip** on a Public Road or Footpath

**Please note that all applications for permits must be received by Meath County Council 5 working days (excluding Sat & Sun & Bank Holidays), prior to the delivery of the skip to allow for proper assessment of the application. Meath County Council cannot guarantee permits for any application that fails to adhere to this requirement.**

Location of Skip: (road / street name)	
Location of Waste: (house no. / shop name)	
Proposed dates of permit:	From: ___/___/___ @ ___:___ hrs To : ___/___/___ @ ___:___ hrs
Skip Operator Name:	
Skip Operator Licence No:	
No of Parking Spaces required:	

### Size Of Skip

*Enter details between the arrows below*

e.g. Mini; Midi; Standard; Large 14 Cu Yds;  
Roll On Roll Off; Skip Bag etc

→ \_\_\_\_\_ ←

### Area to be affected

*Please tick appropriate box*

Paid Parking	<input type="checkbox"/>	Carriageway	<input type="checkbox"/>
Footpath	<input type="checkbox"/>	Yellow Lines	<input type="checkbox"/>
Loading Bay	<input type="checkbox"/>	Other	<input type="checkbox"/>

Name of Applicant:			
Address of Applicant:			
Contact Name:			
Telephone:		Fax:	
E-Mail:			

Number of Parking Spaces affected:

**I hereby confirm that all details provided by me on this form are correct.**

Signature of applicant:	_____
Name (in block CAPITALS):	_____
Date:	_____

**Permit fee: €30.00 per day per parking space (or part thereof)**

**Applicant to ensure skip operator has the relevant insurances in place indemnifying Meath County Council.**