



# NEVADA

## COMMUNITY MANAGEMENT

# Dumpster/Pod Placement Request Form

Contact Name \_\_\_\_\_

Contact E-mail/Fax \_\_\_\_\_

Contact Phone \_\_\_\_\_ Association \_\_\_\_\_

Address \_\_\_\_\_

*Homeowner or Tenant (circle one)*

*Dumpster ~ Pod ~ Both (circle one)*

Deposit Required ~ Yes or No    Paid Date \_\_\_\_\_ Check # \_\_\_\_\_

Date(s) Requested \_\_\_\_\_

Location of Structure \_\_\_\_\_

\_\_\_\_\_

THE BELOW PORTION IS FOR NEVADA COMMUNITY MANAGEMENT USE ONLY - PLEASE LEAVE BLANK

Approved: \_\_\_\_\_ Conditionally Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Board Member/Community Manager Signature:

\_\_\_\_\_ Date: \_\_\_\_\_

Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_