



City of Malibu

23825 Stuart Ranch Road ♦ Malibu, California ♦ 90265-4804
(310) 456-2489 ♦ fax (310) 456-3356 ♦ www.malibucity.org

Solid Waste Bin Placement Application

Solid Waste Permit Number: _____ Submittal Date: _____

Proposed Placement Date: _____

Solid Waste Hauler Company: _____

Company Representative: _____

Contact Telephone Number: _____ Fax Number: _____

Bin Size: _____ Total Number of Bins Placed on Site: _____

Address of Proposed Bin Location: _____

Duration of Placement at Location: _____

Onsite Contractor/Home Owner: _____

Owner Contact Telephone #: _____

Check one of the following:

City Street/Right-of-Way

Private Street/Pacific Coast Hwy

Official Use Only: _____ City Staff must approve prior to placement

Received By: _____ Date: _____

Inspected By: _____ Date: _____

City Comments: _____

City Permit Number: _____