



SANITATION & WASTE MANAGEMENT PLAN

Event Name: _____

Event Date: _____ Location: _____

All events must provide a sanitation and waste management plan that includes contractors utilized for restrooms and trash as a condition of the approval of the event.

RESTROOMS

The International Portable Sanitation Association provided the chart within the checklist as a rough guideline for estimating the number of portable sanitation units that will be required for special events. Public events that require portable units must include at least one ADA portable unit.

Is there one restroom at the event location for each gender for every 200 persons? Yes No

If no, please provide portable restrooms for this event at your expense.

Name of Vendor: _____

Contact: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

TRASH

How many trash containers will be used? _____

How often do you plan to empty them? _____

Where will trash be deposited when containers are emptied? _____

How do you plan to manage trash for this event?

Staff and/or volunteers

Contract with a company

Name of company: _____

Contact: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Describe your plan for cleanup and removal of waste during and after your event: _____

SIGNATURE

I, the undersigned, hereby attest that I have notified the Town of Firestone of my sanitation and waste management plan for the event I am organizing.

Applicant Signature: _____ Date: _____

TOWN OF FIRESTONE USE ONLY	
Permit/Request Reviewed By: _____	Department: _____
Edits: _____	Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date: _____