



John A Pond
CHIEF OF THE DEPARTMENT

MAYOR ALEX B. MORSE

APPLICATION FOR PERMIT

City or Town _____

Date _____

DIG SAFE NUMBER

Start Date: _____

In accordance with the provisions of 527 CMR Sec 6 application is hereby made by _____
(Full name of person, Firm or Corporation)

Address _____
(Street or P.O. Box) (City or Town)

For permission to (state clearly purpose for which permit is requested) LPG / PROPANE USE AND STORAGE

Name of competent operator (If Applicable) _____ Cert. No. _____

Date Issued-rejected _____ By _____
(Signature of Applicant)

Date of expiration _____ Fee \$ _____ \$ Paid \$ _____ Due \$ _____



John A Pond
CHIEF OF THE DEPARTMENT

MAYOR ALEX B. MORSE

PERMIT

City or Town _____

Date _____

Permit Number (if applicable) _____

DIG SAFE NUMBER

Start Date: _____

In accordance with the provisions of 527 CMR Sec. 6 this permit is granted to _____
(Full name of person, Firm or Corporation)

for LPG / PROPANE USE AND STORAGE

Restrictions: _____

at _____
(Give location by street and no., or describe in such manner as to provide adequate identification of location)

Fee Paid \$ _____ This Permit will expire on _____

Signature of Official Granting Permit _____ Title _____

➡ This permit must be conspicuously posted upon the premises ⬅