

Signature of Official Granting Permit_

The Commonwealth of Massachusetts Department of Fire Services - Office of the State Fire Marshal P.O. Box 1025, State Road, Stow, MA 01775



APPLICATION FOR PERMIT

			SAFE NUMBER	
Date				
In accordance with the provisions of N	Л.G.L. Chapter 148, as p	provided in Section	application is here	eby made
by				
	(Full name of person,	, Firm or Corporation)		
Address	(Street or P.O. Bo	ox) (City or Town)		
For permission to (state clearly purpos	se for which permit is re	quested)		
Name of competent operator (If Applic	cable)	C	Cert. No.	
Date Issued-rejected By		(Signature of Applicant)		
Date of expiration	Fee	\$ Paid	Due	
Th Department of	he Commonwear Fire Services - '	lth of Massachu Office of the State	setts c Fire Marshal	
Department of	Fire Services - Fox 1025, State C	Office of the State Road, Stow, M	e Fire Marshal	
Department of © 96 (rev. 3/00) P.O. B	Fire Services - Cox 1025, State C	Office of the State Road, Stow, M RMIT	e Fire Marshal	
Department of © 9.0. B City or Town	Fire Services - Cox 1025, State S PER	Office of the State Road, Stow, M RMIT	e Five Mavshal A 01775	
Department of © P.O. B City or Town Date	Fire Services - Cox 1025, State C PER	Office of the State Road, Stow, M RMIT	e Five Mavshal A 01775	
Department of © P. O. B City or Town Date Permit Number (if applicable)	Fire Services - Cox 1025, State S PER	Office of the State Road, Stow, M RMIT DIG: Start Date:	e Five Mavshal A 01775 SAFE NUMBER	
Department of © P. O. B City or Town Date Permit Number (if applicable) In accordance with the provisions of N	Five Services - Oox 1025, State S PER M.G.L. Chapter 148, as p	Office of the State Road, Stow, M RMIT DIG S Start Date:	e Five Mavshal A 01775 SAFE NUMBER	is grante
Department of © P. O. B City or Town Date Permit Number (if applicable) In accordance with the provisions of N	Five Services - Oox 1025, State S PER M.G.L. Chapter 148, as p	Office of the State Road, Stow, M RMIT DIG S Start Date:	e Five Mavshal A 01775 SAFE NUMBER	-
Department of © P. O. B City or Town Date Permit Number (if applicable) In accordance with the provisions of N to	Five Services - Oox 1025, State S PER M.G.L. Chapter 148, as p	Office of the State Road, Stow, Mo RMIT DIG S Start Date: provided in Firm or Corporation)	EFive Marshal A 01775 SAFE NUMBER this permit i	
Department of © P. O. B City or Town Date Permit Number (if applicable) In accordance with the provisions of N to for	Five Services - Oox 1025, State S PER M.G.L. Chapter 148, as p	Office of the State Road, Stow, Mo RMIT DIG S Start Date: provided in Firm or Corporation)	EFive Marshal A 01775 SAFE NUMBER this permit i	
Department of © P. O. B City or Town Date Permit Number (if applicable) In accordance with the provisions of Noto for Restrictions:	Five Services - Sox 1025, State S PER M.G.L. Chapter 148, as p	Office of the State Road, Stow, Mo RMIT DIG S Start Date: provided in	SAFE NUMBER this permit i	
Department of © P. O. B City or Town Date Permit Number (if applicable) In accordance with the provisions of N to for	Five Services - Sox 1025, State S PER M.G.L. Chapter 148, as p	Office of the State Road, Stow, Mo RMIT DIG S Start Date: provided in	SAFE NUMBER this permit i	

This permit must be conspicuously posted upon the premises

Title