

PUMPING AND TRANSPORT PERMIT

Application fee: \$100.00

Make check payable to: **Town of Pembroke**

The Commonwealth of Massachusetts
Town of Pembroke

APPLICATION FOR PERMIT

<p>Do not write in this space</p> <p>Permit No.: _____</p> <p>Date Permit Issued: _____</p>

Application Date: _____

To the Licensing Authorities:

In accordance with the provisions of the Statutes relating thereto, application for a Permit is hereby made by (**please print clearly**)

Name: _____
(Full name of person making application)

Company: _____

Full Address: _____
(Street) (City) (State) (Zip)

Telephone: _____

to **pump and transport septage** in the Town of Pembroke.

Must fill in:

Disposal area location(s): _____

Company/facility submitting pumping reports: _____

(Signature of applicant)

(Address)

(Telephone)