



FP-006

# The Commonwealth of Massachusetts

## **TOWN OF SUDBURY FIRE DEPT.**

### **Application for Standard Permit**

➔ Return completed application to: FIRE@SUDBURY.MA.US

or 77 Hudson Rd Sudbury MA 01776



Permit Number: \_\_\_\_\_

City or Town: **SUDBURY**

Date: \_\_\_\_\_

Applicant's Email Address:

In accordance with the provisions of M.G.L. Chapter 148, as provided in Chapter 1 527 CMR/NFPA 1 application is hereby made by \_\_\_\_\_  
(Full Name of Person, Firm or Corporation) (Phone Number)

of \_\_\_\_\_  
(Address: Street or P.O. Box, City or Town, Zip Code)

for permission to (state clearly purpose for which permit is requested) \_\_\_\_\_

#### **Address of Work:**

Name of Competent Operator/Installer \_\_\_\_\_ Cert. No. \_\_\_\_\_

Date Issued-rejected \_\_\_\_\_ By \_\_\_\_\_  
(Signature of Applicant)

Date of expiration: \_\_\_\_\_ Fee **\$50.00** Amount Paid \$ \_\_\_\_\_



# The Commonwealth of Massachusetts

## **TOWN OF SUDBURY FIRE DEPT.**



Town: **SUDBURY**

Date: \_\_\_\_\_

Permit Number: \_\_\_\_\_

**PERMIT**

In accordance with the provisions of M.G.L. Chapter 148, as provided in Chapter 1 **527 CMR/NFPA 1** this permit is granted to \_\_\_\_\_  
(Full Name of Person, Firm or Corporation)

for \_\_\_\_\_

Restrictions: **Compliance to current edition of Ch. 527; and if applicable associated NFPA standards; and MA Bldg. Code**

at \_\_\_\_\_  
(Street and # or Describe Location for Adequate Identification)

Fee Paid \$ \_\_\_\_\_ This permit will expire on \_\_\_\_\_

Signature of Official Granting Permit: \_\_\_\_\_ Title \_\_\_\_\_



**This permit must be conspicuously posted upon the premises**



Plan Received: \_\_\_\_\_

Permit Received: \_\_\_\_\_

Plan Reviewed: \_\_\_\_\_

Rough Inspection: \_\_\_\_\_

Final Inspection: \_\_\_\_\_

Notes: