

BOARD OF HEALTH

50 The Common Phillipston Ma. 01331 Tel./Fax. 978-249-1735

Application for Disposal Works Installers Permit

Fee: \$100.00 (Please make checks payable to the Town of Phillipston)

In accordance with Regulation 2.2, Title 5, Department of Environmental Protection, all persons and/or firms must obtain a Disposal Works Installer's Permit from the Board of Health.

Please complete the following information and return this application form with payment, and copies of two permits from towns where you are currently licensed, or confirmation of good standing from the Phillipston Board of Health Agent to the Phillipston Board of Health. Also include a completed workers' compensation affidavit. Your permit will be returned in the mail.

Name of Applicant:			
Business Name (if different):			
Name of Individuals 1	Installing Disposal Wor	ks: 2	
3		4	
Business Address: _	Otro ot		
	Street	Town	
_	State Zip	Business Telephone	
		rtify under the penalties of perjury that I, to my best ix returns and paid all State taxes required under law.	
Social Security Number or Federal ID Number		Signature of Individual or Corporate Name	
Date:		Corporate Officer (if applicable)	
For Board Use Only:	Fee Received	d:Check Number:	
	Approved:	Not Approved:	