

Permit #: _____

Newton Fire Department
1164 Centre Street
Newton Center, MA 02459

Fire Prevention/Code Enforcement Division
(617) 796-2230 FAX (617) 796-2239

APPLICATION FOR PERMIT

To: HEAD OF NEWTON FIRE DEPARTMENT

Date: _____

Name: _____

Lic # _____

Address: _____

Telephone: _____

Permit Type: _____

Requests Permission To:

Location: _____

Date Issued: _____

Expiration Date: _____

Fee Paid: _____

Signature of Applicant

*Permits mailed in require a self-addressed stamped envelope if you want a copy of the permit returned