## PRIVATE TRASH PICK-UP PERMIT

Application fee: \$100.00

Make check payable to: Town of Pembroke

## The Commonwealth of Massachusetts Town of Pembroke

## **APPLICATION FOR PERMIT**

Do not write in this space.	
Permit No.:	Application Date:
Date Permit Issued:	<del></del>
To the Licensing Authorities:	
In accordance with the provisions a Permit is hereby made by ( <i>plea</i>	s of the Statutes relating thereto, application for ase <i>print clearly</i> )
Name:	
Name:(Full name	of person making application)
Company:	
Address:	
Address:(Street)	(State) (Zip)
Telephone:	
to <b>private pick-up of trash</b> in the	e Town of Pembroke.
(Signature of applicant)	
(Address)	
(Telephone)	
I, the undersigned, do hereby de Department of Environmental Pro	clare the waste is disposed of at an approved otection Agency site.
(Signature of applicant)	