

Town of McCandless

Fire Prevention Application Permit

Permit No: Application Date:

Applicant: Phone:

Address:

Owner: Phone:

(If different than applicant)

Owner Address:

THE ABOVE NAMED APPLICANT HEREBY MAKES APPLICATION TO CONDUCT THE FOLLOWING ACTIVITY AT THE LOCATION DESCRIBED BELOW:

Activity:

Location:

I hereby acknowledge that, I have read this application, that the information given is correct, and that I am the owner, or duly authorized to act in the owners behalf and as such hereby agree to comply with the applicable requirements of the fire prevention code.

Applicant - Agent Signature Date

Fee Paid:

Comments:

Approved/Disapproved: Approval Date:

Reason for Disapproval: