



The Commonwealth of Massachusetts
Town of Plymouth



APPLICATION FOR SUBMITTAL AND INSPECTION

FP-006
(Rev. 03/16)

➔ Return completed application to: 114 Sandwich St, Plymouth MA 02360 ←

Application Number: _____
City or Town: PLYMOUTH
Date: _____

DIG SAFE NUMBER

Start Date: _____

In accordance with the provisions of MGL Chapter 148 Section 10A, the Fire Department is authorized to make inspections and approve proposed work. This 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)

Name of Competent Operator (if applicable) _____ Cert. No. _____

Date Issued-rejected _____ By _____
(Signature of Applicant)

Date of expiration _____ Fee \$ _____ Amount Paid \$ _____

[Handwritten mark]



The Commonwealth of Massachusetts
Town of Plymouth



FP-006
(Rev. 04/12)

Fire Department, 114 Sandwich Street, Plymouth MA 02360

SUBMITTAL AND INSPECTION

City or Town: PLYMOUTH
Date: _____
Application number: _____

DIG SAFE NUMBER

Start Date: _____

In accordance with the provisions of M.G.L. Chapter 148 Section 10A, the Fire Department is authorized to make inspections and approve proposed work. This application is hereby made

to _____
(Full Name of Person, Firm or Corporation)

For New Sprinkler/Fire Alarm System

Restrictions: NFPA 13

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

Fee Paid \$ _____

Signature of Fire Official: _____ Title _____

