



# TOWN OF LUDLOW

## HEALTH DEPARTMENT

488 Chapin Street  
Ludlow, MA 01056  
(413) 583-5600 ext. 1271 TEL  
(413) 583-5689 FAX



**Public Health**  
Prevent. Promote. Protect.

### Application for Hauling Garbage, Rubbish Septage and Offal

Name of Business: \_\_\_\_\_ Date: \_\_\_\_\_

Business Address \_\_\_\_\_ Phone# \_\_\_\_\_

Mailing (if Different) \_\_\_\_\_ Email \_\_\_\_\_

#### Owner, Corporation, or Partnership Information

| <u>Name</u> | <u>Title</u> | <u>Address</u> | <u>Phone</u> |
|-------------|--------------|----------------|--------------|
| _____       | _____        | _____          | _____        |
| _____       | _____        | _____          | _____        |

Type of Substances to be Removed:    Garbage/Rubbish    Offal    Septage    Other \_\_\_\_\_

Application is hereby made for a permit to operate a **DUMPSTER SERVICE** and for the **REMOVAL OR TRANSPORTATION OF GARBAGE, RUBBISH, OFFAL OR OTHER OFFENSIVE SUBSTANCES** in the Town of Ludlow, in accordance with Chapter 111 Sections 31A and 31B of the General Laws of the Commonwealth of Massachusetts and the Rules and Regulations of the Health Department.

I hereby certify that I am an owner or officer of the above business and all of the information provided is true. I agree to comply with all applicable rules and regulations. I agree to pay all appropriate fees at the time of application submittal.

\_\_\_\_\_  
Print Name of Applicant

\_\_\_\_\_  
Signature of Applicant

Removal of Garbage/Septage Permit Fee: \$125.00 (cash or check) Payable to: Town of Ludlow

Removal of Garbage/Septage Permit expires December 31<sup>st</sup> of current year