



MAYOR ALEX B. MORSE

John A Pond  
CHIEF OF THE DEPARTMENT

### APPLICATION FOR PERMIT

City or Town \_\_\_\_\_

Date \_\_\_\_\_

|                   |
|-------------------|
| DIG SAFE NUMBER   |
| _____             |
| Start Date: _____ |

In accordance with the provisions of \_\_\_\_\_ application is hereby made  
by \_\_\_\_\_  
*(Full name of person, Firm or Corporation)*

Address \_\_\_\_\_  
*(Street or P.O. Box) (City or Town)*

For permission to (state clearly purpose for which permit is requested) CONDUCT WELDING AND/OR CUTTING  
OPERATIONS AND STORE ASSOCIATED FUEL GASES

Name of competent operator (If Applicable) \_\_\_\_\_ Cert. No. \_\_\_\_\_

Date Issued-rejected \_\_\_\_\_ By \_\_\_\_\_  
*(Signature of Applicant)*

Date of expiration \_\_\_\_\_ Fee \$ \_\_\_\_\_ \$ Paid \$ \_\_\_\_\_ Due \$ \_\_\_\_\_

X



MAYOR ALEX B. MORSE

### PERMIT

CITY OF HOLYOKE  
FIRE DEPARTMENT HEADQUARTERS

John A Pond  
CHIEF OF THE DEPARTMENT

City or Town \_\_\_\_\_

Date \_\_\_\_\_

|                   |
|-------------------|
| DIG SAFE NUMBER   |
| _____             |
| Start Date: _____ |

Permit Number (if applicable) \_\_\_\_\_

In accordance with the provisions of \_\_\_\_\_ this permit is granted  
to \_\_\_\_\_  
*(Full name of person, Firm or Corporation)*  
for CONDUCTING WELDING AND/OR CUTTING OPERATIONS

Restrictions: \_\_\_\_\_

at \_\_\_\_\_  
*(Give location by street and no., or describe in such manner as to provide adequate identification of location)*

Fee Paid \$ \_\_\_\_\_ This Permit will expire on \_\_\_\_\_

Signature of Official Granting Permit \_\_\_\_\_ Title \_\_\_\_\_

➔ This permit must be conspicuously posted upon the premises ➔