



**City of HOLYOKE
DEPARTMENT OF PUBLIC WORKS
63 CANAL STREET HOLYOKE MA. 01040
PERMIT APPLICATION**

APPLICATION FOR PERMIT TO OCCUPY OR OBSTRUCT THE PUBLIC WAY

This application must be completed in its entirety prior to the time of submittal. It is the responsibility of the applicant to provide all pertinent information required herein.

Application Date: _____

Name of Applicant: _____

Applicant Address: _____

Applicant Email Address: _____

Applicant Phone #: _____

Applicant Cell Phone #: _____

Organization/Business Name: _____

Organization/Business Phone: _____

Organization/Business Address: _____

Location of Occupancy/Obstruction: _____

Street #: _____ Street Name: _____

Estimated Dates of Occupancy:

From: _____ To: _____

Reason for Occupancy/Obstruction: _____

If Other, Please Explain: _____

