TOWN OF WINCHENDON

OFFICE OF THE TOWN MANAGER

109 FRONT STREET, WINCHENDON, MASSACHUSETTS 01475-1758

Telephone: (978) 297-0085

Facsimile: (978) 297-1616

manager@town.winchendon.ma.us

LICENSE/PERMIT/RENEWAL APPLICATION

	-1 1/	:11	
Date:3/19/20	Edward Va	Mancourt	207-2050
Name:ED'S	SCRAP METAL	Telephone: 978-	297-2050
Address:	64 MAIN ST		
IF BUSINESS:			978-297-2050
Business Name:	SAME	Telephon	e:
Address:	SAMEREN	NEWAL	
Social Security or Business	s ID number:		
Assessor's Map	Parcel	(obtain from Assessor's Office)	ON FILE
Type of License/Permit Re	quested:	DEALERS: SECOND HAND ARTICLE	
Additional Information:			
Signature of Applicant:			
☐ Non-Profit	C	FFICE USE ONLY	
Foo: \$100, -			3/20
Fee: \$\frac{\\$100}{\}\$ To: Police Department, Fire Department, Building Commissioner/Zoning Enforcement Officer, Police Department, Fire Department, Building Commissioner/Zoning Enforcement Officer,			
Conservation Commission, Board of Health, Tax Collector, Planning Director, Town Clerk			
Please offer your comments regarding the above application. A hearing is scheduled before the Board of			
Selectmen on $\frac{4/(3/20)}{}$. Your response is requested by $\frac{4/3}{30}$.			
Selectmen on		our response to requeeted by	
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