



Department of Inspectional Services
Worcester, Massachusetts

Housing Unit

John R. Kelly
Commissioner/
Building Commissioner

Amanda M. Wilson, Director
Housing/Health Inspections

FEE \$30.00 PER UNIT

PERMIT NO _____

DATE: _____

APPLICATION FOR PLACEMENT AND CONTINUED USE
OF A NON-PERMANENT CHEMICAL TOILET

APPLICATION MADE BY: _____

COMPANY ADDRESS: _____

COMPANY CITY, STATE/ZIP: _____

COMPANY PHONE: _____

NUMBER OF UNITS: _____ FEE ENCLOSED: \$_____

DATE OF PLACEMENT: _____ DATE OF REMOVAL: _____

PURPOSE: (construction, carnival, etc.) _____

STREET ADDRESS/LOCATION: _____

ORDERED BY (customer): _____

The applicant here by agrees to install and maintain non-permanent chemical toilet(s) according to provisions of 310 CMR 15:00, The State Environmental Code, Title V and the "Worcester Division of Code Enforcement Regulations".

Signed: _____

Approved By: _____ date _____

Rejected By: _____ date _____

Date(s) Inspected: _____

Date REMOVED: _____