



**CITY OF LAWRENCE**  
INSPECTIONAL SERVICES DEPARTMENT  
200 COMMON STREET,  
LAWRENCE, MA 01848  
Telephone: (978) 794-5950

**APPLICATION FOR DEBRIS DISPOSAL**

Dear Applicant,

In accordance with the provisions of MGL c 40, & 54, a condition of Building Permit Number \_\_\_\_\_ is that the debris resulting from this work shall be disposed of in a properly licensed solid waste disposal facility as defined by MGL c 111, & 1 50A.

**SECTION 1- PROPERTY OWNER AND PROPERTY LOCATION**

1.1 Owner of Record:

Name (print) \_\_\_\_\_

1.2 Owner Address: No: \_\_\_\_\_ Street: \_\_\_\_\_

1.3 Owner Phone # \_\_\_\_ / \_\_\_\_ / \_\_\_\_

1.4 Property Address: No: \_\_\_\_\_ Street: \_\_\_\_\_

1.5 Number of building on lot? \_\_\_\_\_

1.6 Notes: \_\_\_\_\_

1.7 Assessor Map & Parcel Number

Map Number \_\_\_\_\_

Parcel Number \_\_\_\_\_

1.8 Notes: \_\_\_\_\_

1.9 Licensed Construction Supervisor- Phone # \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name: \_\_\_\_\_

License # \_\_\_\_\_

address: \_\_\_\_\_

- This debris will be disposed of in which City or Town: \_\_\_\_\_

Street Address City / Town \_\_\_\_\_

- Type of Container for Transportation: \_\_\_\_\_

**Note: Bill of Lading must be submitted before final inspection and sign off of permit.**

NAME (PRINT) \_\_\_\_\_

X \_\_\_\_\_

Signature of Permit Applicant

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_