



Town of Fairhaven Board of Health

Town Hall • 40 Center Street • Fairhaven, MA 02719
Telephone: (508) 979-4023 ext. 125 • Fax: (508) 979-4079



Public Health
Prevent. Promote. Protect.

Permit Number: _____ Fee: \$250.00
Paid on _____ Cash ___ Check# ___ Online _____

OFFAL PERMIT APPLICATION & RENEWAL APPLICATION GARBAGE and/or SEPTIC HAULERS

(Removal, Transport, Disposal of Garbage, Septage, Offal & Other Offensive Materials)

Applicant _____

Company Name _____

Address _____

Telephone # _____ Fax # _____

Type of Operation _____

Number of Vehicles to be placed in operation under this permit _____

Registration Numbers & License Plates of all vehicles used in operation:

<u>Registration #</u>	<u>License #</u>	<u>Capacity</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Location where waste will be disposed

Septic and grease haulers must submit a monthly pumping report to the Board of Health indicating site pumped and disposal facility.

OFFAL haulers must contact the Health Department to schedule an inspection of their truck prior to applying or renewing their OFFAL permit.