

**TOWN OF WELLFLEET  
APPLICATION FOR PERMIT TO USE TOWN OWNED PROPERTY**

Applicant \_\_\_\_\_ Affiliation or Group \_\_\_\_\_

Telephone Number \_\_\_\_\_ Mailing Address \_\_\_\_\_  
\_\_\_\_\_

Town Property to be used (include specific area) \_\_\_\_\_  
\_\_\_\_\_

Date(s) and hours of use: \_\_\_\_\_

Describe activity including purpose, number of persons involved, equipment to be used, parking arrangements, food/beverage service, etc. Also please indicate if fees will be charged by applicant.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant is responsible for obtaining all necessary permits and inspections (see page 2)

Action by the Board of Selectmen:

\_\_\_\_\_ Approved as submitted

\_\_\_\_\_ Approved with the following condition(s): \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Disapproved for following reason(s): \_\_\_\_\_  
\_\_\_\_\_

Signatures of the Board

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPLICANT IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND INSPECTIONS**

<b>Health/Cons. Agent Signature:</b>  Comments/Conditions:  Permits/Inspections needed:	<b>Inspector of Buildings Signature:</b>  Comments/Conditions:  Permits/Inspections needed:
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<b>Police Dept. Signature:</b>  Comments/Conditions:	<b>Fire Dept. Signature:</b>  Comments/Conditions:
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<b>DPW Signature:</b>  Comments/Conditions	<b>Beach Dept. Signature:</b>  Comments/Conditions:
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<b>Shellfish Constable Signature:</b>  Comments/Conditions:	<b>Harbormaster Signature:</b>  Comments/Conditions:
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<b>Recreation Dept. Signature:</b>  Comments/Conditions:	<b>Other:</b>
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