



Town of Swansea, Massachusetts
Fire Department

50 New Gardner Neck Road
Swansea, MA 02777
(508) 672-4305



Application for Open Burning Permit

Date: _____

Name: _____

Address: _____

Telephone Number(s): _____

I acknowledge that I have read and understand the attached Open Burning Regulations. I further understand that this permit is subject to immediate revocation upon violation of said regulations.

Signature

Violation of any provision of said section shall be punished by a fine of not more than 500 dollars, plus the cost of suppression, or by imprisonment for not more than one month, or both. (MGL Ch 48, Sec 13)

DEPARTMENT USE ONLY

Permit No.: _____

Issued By: _____

Note(s): _____
