



TOWN OF WESTON

Board of Health
11 Town House Road
P.O. Box 378
Weston, MA 02493

Tel: 781-786-5030
Fax: 781-786-5039

Fee: \$ 55.00

Check # _____ Cash ()

Permit # POP- _____

PERMIT APPLICATION FOR A TEMPORARY PORTABLE TOILET

New Application _____ Renewal Application _____

Portable Toilet Site Address _____

Dates of use _____

Applicant

Rental Company*

Name _____

Name _____

Address _____

Permit # PUM- _____

Phone _____

Phone _____

Email _____

Email _____

This is an application for the purpose of obtaining a permit to place a rented portable toilet on a property in the town of Weston. Units must be in good condition and maintained in a clean and sanitary manner while on site. Evidence of an agreement with a final disposal facility must be provided to the Board of Health.

* The rental company must be licensed in the Town of Weston. (see current License list)

Applicant's Signature

Board of Health: Approved _____ Denied _____ Initial _____