

# TOWN OF AVON FIRE DEPARTMENT APPLICATION FOR SYSTEM IMPAIRMENT PERMIT

In accordance with the provisions of Massachusetts General Law,  
Chapter 148, as provided in Section 10A  
Application is hereby made by:

Name:  
(Full name of person Firm or Corporation)

Address:  
(Street or PO Box & City or Town)

**For permission to:** *Disconnect / Impair Fire Protection Equipment according to 527 CMR 1 Section 13.1.8 and MGL 148 Sec 27A.*

At:

Name of License Holder:

Cert. #

\_\_\_\_\_  
(Signature of applicant)

Testing / Maintenance: \$25.00 ☐ Expires December 31<sup>st</sup> of year issued.

Removal / Alteration: \$50.00 ☐ Expires with Building Permit      Building Permit #      (required)

Submit this permit application along with a check for the applicable fee to:

Avon Fire Department  
150 Main Street  
Avon, MA 02322  
Attn: Fire Prevention