

PERMIT NUMBER _____

VALID UNTIL DECEMBER 31, 20____

**TOWN OF GORHAM
APPLICATION FOR TRANSFER STATION PERMIT**

Name: _____

Address: _____

This permit is for use by Town of Gorham Residents/Property Owners ONLY and is for household wastes from primary properties within the Town of Gorham only.

Each and every household using the transfer facility must obtain their own permit.

This permit will be used in accordance with the regulations as adopted by the Gorham Town Board.

Signature of Applicant

Signature Town Clerk

Date of Approval