STOW CONSERVATION LAND PERMIT FORM

Name	
Address	
Organization (if applicable)	License Plate Number
Phone : home/work/cell (c	circle one)
Emergency Contact Name and Number:	
Conservation Parcel(s) Requested:	
Intended Use (check all that apply):	
Group Use Camping	Fire * Night Use
Other	
Written Description of Activity (use back if nee	eded)
Estimated Number of Participants:	
Check if you have received and read the requested a permit	regulations for the property for which you have
Signature	Date of Request
* Fire permits also require a p	permit from the Stow Fire Department
the possession of applicant during use of the	vance of intended use. Written Permits need to be in property. Permits can be revoked if the rules and mits are good only for the indicated and approved
Approved by:	_
Conditions (if any):	_
Date:	

Conservation Commission – please make 3 copies of this form once it is fully completed. Keep the original, give the applicant a copy, and forward a copy to the Police Department and to the Fire Department.