FP-44E
(revised 1/08)

The Commonwealth of Massachusetts
Department of Fire Services - Office of the State Fire Marshal
P.O. Box 1025, State Road, Stow, MA 01775

APPLICATION FOR EXEMPTION FROM PERMIT TO TRANSPORT COMBUSTIBLE LIQUIDS

City, town or district: _____ Date: _____

In accordance with the provisions of 527 CMR 8.00: Board of Fire Prevention Regulations, application is hereby made for certificate of exemption of the transport vehicle described herein.

Name of Owner: _____

Address: _____
(Address of permitted land where vehicle is parked overnight)

Vehicle Type _____ Make _____ Year _____

Registration _____ VIN# _____ Tank Capacity _____

I, the undersigned, certify under the penalty of perjury that all information on this application is correct. Furthermore, the tank vehicle as described meets the specifications for transporting flammable liquids in accordance with U.S. DOT, Title 49 CFR.

Applicant: _____ _____
(Print Name) (Signature)

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CERTIFICATE OF EXEMPTION

City, town or district: _____ Date: _____

In accordance with the provisions of 527 CMR 8.00 this exemption from a permit to transport combustible liquids is granted to:

Name of Owner: _____
(Full name of person, firm or corporation granted exemption)

Address: _____

Vehicle Type _____ Make _____ Year _____

Registration _____ VIN# _____ Tank Capacity _____

_____ _____
(Siganture of official granting exemption) (Print Name and Title)

This certificate of exemption shall remain in effect provided the tank vehicle herein described is maintained in accordance with U.S. DOT, Title 49 CFR, specification for transporting flammable liquids.

THIS ORIGINAL MUST REMAIN WITH THE TRANSPORT VEHICLE