

## TOWN OF CHESTER, MASSACHUSETTS

01011

BOARD OF HEALTH 15 Middlefield Street Chester, MA 01011 413-354-7781 BoardofHealth@townofchester.net

PERMIT #				
FY2024 \$65.00 per househo Yea	ld (senior dis	ON PERMIT FO count over 65 \$5 res 06-30-2024		ID)
please print clearly				
NAME:				
*ADDRESS:				
MAILING ADDRESS:				
VEHICLE LICENSE PLATE (required):				
*Please note you must be a residen				
ADDITIONAL VEHICLES IN HO 1. PLATE				
2. PLATE			0	
	usehold:	\$ 65.00	or senior \$50.00	
Ado	ditional Vehic	eles: \$		

Please affix your permit sticker to your vehicle in plain sight or show it to the attendant upon entrance. Thank you.

Please make checks payable to: Town of Chester, 15 Middlefield Road, Box #4, Chester, MA 01011

**Total:**