Town of Millis Curb Cut Application

| Applicant (Please Print): | | | |
|---|--|---|--|
| Mailing Address: | | | |
| Telephone: | | | |
| Address of Curb Cut: | | | |
| Sketch of proposed cut must sidewalks, location and dista other fixture, as well as locat I hereby acknowledge receip the Curb Cut granted herein and to any additional restricti | nce to hydion of wate t of the Cu will be inst | rants, poles, signs, trees, or er shut-off orb Cut Rules and Regulation called according to said Rul | catch basins or any ons and agree that |
| Applicant's Signature | | Date | |
| Additional Conditions: | | | |
| | | | |
| Approved: | | | |
| James McKay DPW Director | Date | Town Administrator | Date |