



The Commonwealth of Massachusetts

City / Town of \_\_\_\_\_



Application for Exemption from Permit to Transport Combustible Liquids

FP-044E (Rev. 1.1.2015)

Return completed application to: \_\_\_\_\_ ←

City or Town: \_\_\_\_\_ Date: \_\_\_\_\_

In accordance with the provisions of 527 CMR 1.00 Section 1.12.8.25.3.5, 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: Street or P.O. Box, City or Town, Zip Code)

Vehicle Type: \_\_\_\_\_ Make: \_\_\_\_\_ Year: \_\_\_\_\_

Registration: \_\_\_\_\_ VIN #: \_\_\_\_\_

Tank Capacity: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

Approved  Disapproved Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature Head of the Fire Department or Designee)

\_\_\_\_\_  
(Print Name Head of the Fire Department or Designee)

FIRE DEPARTMENT FILE COPY



The Commonwealth of Massachusetts

City / Town of \_\_\_\_\_



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CERTIFICATE OF EXEMPTION

City or Town: \_\_\_\_\_ Date: \_\_\_\_\_

In accordance with the provisions of 527 CMR 1.00 Section 1.12.8.25.3.5, this exemption from a permit to transport combustible liquids is granted to:

Name: \_\_\_\_\_  
(Full Name of Person, Firm or Corporation)

Address: \_\_\_\_\_

Vehicle Type: \_\_\_\_\_ Make: \_\_\_\_\_ Year: \_\_\_\_\_

Registration: \_\_\_\_\_ VIN #: \_\_\_\_\_

Tank Capacity: \_\_\_\_\_

Print Name and Title of Official granting Exemption \_\_\_\_\_

Signature of Official granting Exemption \_\_\_\_\_

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**

