



OFFICE OF BOARD OF SELECTMEN  
**TOWN OF NORWELL**

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**Norwell Center/Town Common Usage Request FORM**

Applicant Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Reason for Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Rain Date: \_\_\_\_\_

Hours Requested: \_\_\_\_\_

Completed Form should be returned at least one month before the scheduled event.

**FOR OFFICIAL USE ONLY**

HIGHWAY ( ) Approve ( ) Disapprove Initials \_\_\_\_\_

Comments: \_\_\_\_\_

FIRE ( ) Approve ( ) Disapprove Initials \_\_\_\_\_

Comments: \_\_\_\_\_

POLICE ( ) Approve ( ) Disapprove Initials \_\_\_\_\_

Comments: \_\_\_\_\_

CUSHING ( ) Approve ( ) Disapprove Initials \_\_\_\_\_

Comments: \_\_\_\_\_

Approved by Peter Morin, Town Administrator on: \_\_\_\_\_