



Haverhill

License Commission, Room 118
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OFFICE USE ONLY

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|---------------------------|-------------------|
| Official Use ONLY: | TIME STAMP |
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APPROVAL/COMMENTARY

COMMENTS:

Chief of Police _____ Date _____

COMMENTS:

Mayor _____ Date _____

COMMENTS:

Health and Inspectional Services _____ Date _____

COMMENTS:

Superintendent Highways _____ Date _____

COMMENTS:

Engineering Department _____ Date _____

APPROVAL OF LICENSE COMMISSION

Date _____