

Commonwealth of Massachusetts Division of Professional Licensure

Office of Public Safety & Inspections

1000 Washington Street - Suite 710 - Boston - MA 02118

APPLICATION FOR VARIANCE

RECREATIONAL TRAMWAY BOARD

Pursuant to 526 CMR 10.12

		T. N. 1	
Applicant		License Number	
D/B/A Street Address Number and Name		Fax Number Telephone Number	
Please indicate each section of the r	regulation and\	or ANSI standard for which a v	variance is being requested.
526 C	MR	ANSI	
526 C	MR	ANSI	
In accordance with 526 CMR, Sect documentation demonstrating that requested relief will not compromise	full compliance		
Please briefly explain reason for vari	iance request		
Is documentation in support of meet	ting the threshol	d of public safety attached?] Yes No
	CER	TIFICATION	
I hereby certify, under penalty of law of my knowledge.	w, that this docu	ument and all attachments are t	true and accurate to the best
Signature of Applicant		Print Name of Applicant	 Date

Please send applications and all accompanying material to:

Division of Professional Licensure

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