



SELECT BOARD
TOWN HALL
365 BOSTON ROAD
BILLERICA, MASSACHUSETTS 01821
978-671-0939
FAX: 978-671-0947
selectboard@town.billerica.ma.us

**AUTHORIZATION FORM
LEGAL AD**

DATE: _____

NAME: _____
(Please print)

ADDRESS: _____
(Please print)

EMAIL (to send legal ad proof): _____
(Please print)

In connection with my application/petition for:

I authorize the Town of Billerica to place a Legal Notice, as required for the Public Hearing before the Select Board, for this application/petition in the local newspaper and accept full responsibility for the costs of said advertisement(s). I understand I will be responsible for submitting a check made payable to the "Town of Billerica" for the cost of the legal advertisement prior to the scheduled public hearing.

Signed:

(Petitioner/Legal Representative of Applicant/Petitioner)