



BOARD OF HEALTH
577 Bay Road, P.O. Box 429
Hamilton, MA 01936

Tel: 978-468-5579

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Chapter VIII.
Application For Permit for the Keeping of Animals

Name of Applicant:
 (Full Name of person, firm or corporation making application):

Address of Applicant

Telephone Number & E-Mail address

List all animals for which the permit is requested and total due:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Due _____

Signature of Applicant _____ Date: _____

- Horses \$10.00/animal
- Livestock \$10.00/animal
- Ponies \$10.00/animal
- Swine \$10.00/animal
- Donkeys \$10.00/animal
- Mini Donkeys \$10.00/animal
- Goats \$10.00/animal
- Sheep \$10.00/animal
- Small Animals- \$5.00/10 or more
- Rabbits, Poultry

Permits expire December 31st, and must be renewed annually.

For Office Use: Permit #: _____

Date of Issue: _____