



TOWN OF HOPEDALE

Board of Health

78 Hopedale Street - P.O. Box 7

Hopedale, Massachusetts 01747

Tel: 508-634-2203 Ext. 222 Fax: 508-634-2200

APPLICATION FOR KEEPING OF ANIMALS PERMIT

Please print:

Name: _____

Address: _____

Phone No.: _____ Email: _____

List Animals:

| Type of Animal | Number |
|----------------|--------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |

(add an additional sheet to list animals, if necessary)

Are animals housed in a barn? ☐ Yes ☐ No

Do you have adequate shelter/fencing for the animals? ☐ Yes ☐ No

Attach plot plan displaying location of animal housing and fencing.

Attach waste/manure removal and odor control plan.

Attach emergency plan for food, shelter, and transportation should a catastrophic event occur.

Have you received/reviewed a copy of the Hopedale Board of Health Keeping of Animals Regulations? ☐ Yes ☐ No

Signature of Applicant

Date

Approvals:

Building Inspector – if permanent structure is 200 sq. ft. or more

Print Name

Signature

Date

Conservation Agent – if structure is 100 ft. of open water or wetlands

Print Name

Signature

Date

Animal Inspector

Print Name

Signature

Date

For Board of Health Use Only

Date Received: _____

Approved by:

Signature _____

Title

Date Permit Issued: _____

Permit No.: _____