

Board of Health
71 Mt. Vernon Street
Winchester, MA 01890

Tel: 781-721-7121
Fax: 781-729-1794



Application for Keeping of Animals

Type of Permit: ___ Renewal/ \$20 fee

I am requesting to keep the following animals (indicate # of each):

___ Hen/Chicken ___ Duck/Geese ___ Sheep ___ Goat ___ Horse ___ Cow

Applicant Name: _____

Applicant Address: _____

Phone #/Cell phone #: _____ E-mail address: _____

Provide information to indicate how the property will be maintained including your plan to:

| |
|---|
| Store animal feed: |
| |
| |
| Remove droppings: |
| |
| |
| Limit odors: |
| |
| |
| Control for rodents: |
| |
| |
| Control for insects (flies): |
| |
| |
| Free-Range of Chickens: Only in fully enclosed fenced-in yards, and hens will be supervised at all times while roaming. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| |
| Any additional information (may include an attachment): |
| |
| |

If conditions changed from last year, please provide a plan/sketch (may be hand drawn) of the property on a separate paper. Include all dwellings, bodies of water (eg: stream) on the lot, the location of the animal housing and any relevant designated animal areas such as a run, etc. Indicate distances from dwellings and lot lines.

By signing this application, I attest that the information provided is true and accurate and I agree to abide by the BOH "Regulation for the Keeping of Animals."

Applicant Signature: _____ Date: _____

over

Animal Inspector use only

Inspector Name: _____

Inspection Date(s): _____

Conditions at property meet the requirements of the BOH “Regulation for the Keeping of Animals” and reflect the information provided in this application. Yes No. If No, provide comments below for correction.

Comments:

Inspector Signature: _____