



Memorial Town Hall
157 Main Street
Spencer, MA 01562
Tel. 508-885-7500 Ext. 180
Fax 508-885-7519

TOWN OF SPENCER

Office of the Board of Health

APPLICATION FOR PERMIT FOR KEEPING ANIMALS OR FOWL

1. Applicant Name: _____ Applicant Address: _____

Applicant Telephone Numbers: (home) _____ (cell) _____

Applicants e-mail address: _____

2. Location of premise to be used (if different): _____

3. Attach list of direct abutters of property where animals are to be kept.

4. Attach list of species of animals to be kept and number of each.

5. Attach plot plan with the following:

- borders with dimensions of area where the animals will be kept and used by animals,
- location of all structures on the property,
- confining fences and barriers,
- any bodies of water or surface watercourses located within 100' feet of the housing for the one or more animals,
- location of any septic system on the premises,
- location of any private wells within the perimeter of the area where the one or more animals will be kept or within 100' of the perimeter,
- location of manure containers, and drainage details

6. Attach a written plan for the management and disposal of animal waste, storage of feed & method used to control flies and vermin.

Permit fee (initial) () \$25.00 Permit Number: I- _____

Renewal (no charge) () Permit Number R- _____

Zoning Officer approval needed: Yes () No ()

Application Approved : _____ Date: _____
(BOH AGENT)

Application Disapproved*: _____ Date: _____
(BOH AGENT)

*Reasons attached.

I have read and understand the Regulations Governing the Keeping of Animals and Fowl.

Applicants Signature: _____ Date: _____