

TOWN OF MEDWAY Commonwealth of Massachusetts Medway Town Hall 155 Village Street Medway, MA 02053 Phone (508) 533-3253

BOARD OF HEALTH

Keeping of Animals Permit Application

Date:	_		
Type of Application:	□ New	□ Renewal	
Applicant Information:			
Name:			
Address where animals will	be kept:		_ Medway, MA 02053
Mailing Address:			
Phone Number:		Email:	
Emergency Contact Number	er:		
, , , ,		II be kept? □ Yes □ No mit written approval from property owner.	
Property Owner Informati	on:		
Name:			
Mailing Address:			
Phone Number:		Email:	

Renewal Certification (for renewal applicants only):

□ I have not made changes to my approved animal permit (skip questions below, but complete attestation/ signature area on page 3)

□ I have made changes to my approved animal permit (detail changes below):

For new applicants or if changes were made to your operation:

List maximum number and species of animals below:

Chickens	Cows	Donkeys	Ducks	Emus	Game Birds	Geese	Goats
Mules	Ostrich	Ponies	Rabbits	Rhea	Sheep	Swine	Turkeys

Manure/ waste management plan. Describe how animal waste/ manure will be stored, composted, or removed off site:

Storage of feed plan. Describe how animal feed will be stored to prevent pests or objectionable odors:

Pest management plan. Describe facilities will be kept to prevent presence of pests:

Describe where animal structures will be located and square footage of structure:

****Please refer t	o setback requireme	nts in regulation	
Building Depart	ment:		
□ Approved	□ Denied	Signature:	
Comments:			
Conservation:			
□ Approved	□ Denied	Signature:	
Comments:			
Statement: I,	ded in this applicatio	n and fully understand that a	attest to the accuracy of the

information provided in this application and fully understand that any deviation from the above without prior approval from the Medway Board of Health may nullify the final approval. I affirm to comply with the "Regulation of the Medway Board of Health Minimum Standards for the Keeping of Animals", all federal, state and local laws, regulations and other requirements. I understand refusal by a permit holder to cooperate with the inspections conducted by the Medway Board of Health or Animal Control may result in the suspension of a permit. Pursuant to M.G.L. CH. 62C, § 49A, I certify under the penalties of perjury that to the best of my knowledge and belief have filed all State tax returns and paid all State taxes required under law.

Name (Please Print)

Signature

Submit the following:

- Completed Keeping of Animals Permit Application. Incomplete applications and missing documents may delay the review and permitting process.
- For new applicants or if changes were made to location of animal structure- Plot plan, with dimensions of the area where animals will be kept. Also required on the plot plan are the locations of dwellings, structure(s) (including fences), abutting structures(s), corrals, septic systems, private wells, and wetlands. A hand drawn plot plan is acceptable so long as it is of sufficient detail and quality to allow for Board review.
- For new applicants- Proof of abutters notifications. Abutter notification form is available at the Medway Board of Health website and office. Abutters within 300ft must be notified and a list of abutters certified by the Board of Assessors must be submitted, along with a sworn statement that the applicant has mailed notice to each abutter by first class mail.