



TOWN OF BREWSTER
 2198 MAIN STREET
 BREWSTER, MA 02631
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 BRHEALTH@BREWSTER-MA.US

OFFICE OF
 HEALTH DEPARTMENT

APPLICATION FOR THE KEEPING OF ANIMALS/POULTRY

Date: _____

Location: _____

Name of Operator: _____

Mailing address: _____

Phone #: _____

BARNs

ENCLOSURES/COOP

Distance from: Front line

Back line

Side line

Owners well

Abutters well

Abutters dwelling

Wetland

Town water supply

Number & kinds of animals/poultry to be kept: _____

Type of flooring: _____ Feed Storage: _____ Manure Disposal: _____

Proof must be provided that all horses have been vaccinated annually, against Tetanus and Eastern Encephalitis.

Draw a sketch of lot on back showing barn/coop, all well, adjacent dwellings, wetlands, paddock and pen areas. Include dimensions of barn/coop with stalls, feed storage location, etc.

****Please enclose \$30.00 fee or \$40.00 fee (for 10 or more livestock, not including poultry)**
 CHECKS MADE PAYABLE TO "TOWN OF BREWSTER"

BOARD OF HEALTH USE ONLY

Approved by: _____ Date: _____

Inspected by: _____ Date: _____