



**Town of Eastham  
Board of Health**

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(508)240-5900 x3230  
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Email: [health@eastham-ma.gov](mailto:health@eastham-ma.gov)

For Town Use Only: TOB#: _____
Date Received: _____
Check #: _____
Fee: \$100

**TOBACCO SALES PERMIT APPLICATION**

Please Complete all Questions

Name of Establishment:	Email:
Business Address:	Business Tel:
Town/Zip:	
Applicant Name:	Applicant Email:
Applicant Address:	Applicant Home Tel:
Town/Zip:	24 Hour Emergency Number:
Number of Employees Selling Tobacco Products:	
Number of Cash Registers where Tobacco Products are Sold:	

**PLEASE READ THE STATEMENTS BELOW BEFORE SIGNING**

*Your signature will indicate that you have read and understand all questions and statements on this application.*

I (we) understand that illegal sales of tobacco products and/or continuous egregious non-compliance with the Board of Health Sale of Tobacco Control Regulation may result in the issuance of fines, temporary suspension and/or revocation of this permit.

I (we) understand that the Barnstable County Tobacco Control Program will conduct periodic unannounced checks to monitor tobacco retailer compliance with provisions of the Sale of Tobacco Regulation affecting "Youth Access to Tobacco Products" including but not limited to possession of a valid Massachusetts Department of Revenue Tobacco Sales License, and the posting of the state and local regulatory signage.

I (we) will train sales staff/employees to conduct tobacco sales legally.

I (we) will not sell single cigarettes.

I (we) understand that this Tobacco Sales Permit expires each year on December 31st.

Pursuant to MGL c. 62C, sec. 49A, I certify under the penalties of perjury that the owner(s) of this establishment, to the best of my knowledge and belief have filed all applicable tax returns and paid all taxes required under law. I, the undersigned, attest to the accuracy of the information provided in this application, and affirm that this tobacco retail establishment will comply with all other applicable law.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Copies of the Eastham Board of Health Sale of Tobacco Regulation available online at:  
[https://www.eastham-ma.gov/sites/easthamma/files/uploads/sale\\_of\\_tobacco\\_boh\\_regulation.pdf](https://www.eastham-ma.gov/sites/easthamma/files/uploads/sale_of_tobacco_boh_regulation.pdf)