



**Town of Eastham**  
**Board of Health**  
 2500 State Hwy, Eastham, MA 02642  
 (508)240-5900 x3230  
 Fax: (508)240-5918  
 Email: health@eastham-ma.gov

For Town Use Only:	
Permit #:	_____
	_____
	_____
Date Received:	_____
Fees due: \$	_____
Check #:	_____

## NON-COMMERCIAL FARM ANIMAL PERMIT APPLICATION

<input type="checkbox"/> Water test
<input type="checkbox"/> Certified Plot Plan
<input type="checkbox"/> Animal Care Plan
If applicable:
<input type="checkbox"/> Building Approval
<input type="checkbox"/> Conservation Approval
<input type="checkbox"/> Zoning Approval

*All non-commercial farm animal permit applications must include the completed form, a copy of the calendar year routine water test results, certified plot plan (must show dimensions of the area where animals will be kept, exercised, and sheltered, food storage and waste collection sites, location of primary residence, fences, abutting structures, septic systems, private wells and wetlands (within a 100' radius)), animal care plan, & owner authorization (if applicant is not the owner).*

*For 2022, permit fees have been waived.*

Applicant Name:	
Applicant Address:	
Applicant Mailing Address (if different):	
Applicant Telephone No:	Applicant Email:
Owner Name (if different from applicant):	
Owner Address:	
Owner Telephone No:	Owner Email:
Property where animals shall be held:	
Is the property within 100 ft of a wetland or coastal bank (yes or no)?	
Type of Animals	Number of Animals:

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_