

# Weymouth Health Department

**Director**  
**Daniel McCormack,**  
**R.S., C.H.O**

**Mayor**  
**Robert L. Hedlund**



**Health Department**  
**75 Middle Street**  
**Weymouth, MA 02189**  
**Tel. (781) 340-5008**  
**Fax. (781) 682-6112**

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## **Livestock Permit Application Process Letter** **Town Ordinance 6-704**

Completed application packets must be mailed or dropped off at the Health Department. Applications cannot be submitted electronically. Contact our office at 781-340-5008 with any questions.

All documents requiring signature must be signed and each section completed in full. Incomplete applications will be returned. Your application must include the following documentation:

- ☐ Completed Signed Application. \*\*\* The Application must be typed and printed. Please **do not** hand-write applications. \*\*\*
- ☐ Fee:
  - ☐ Checks (made payable to Town of Weymouth) or ☐ Cash
- ☐ Once the completed application is received, the Animal Control Officer will contact you to schedule an inspection of your property. The permit will be issued upon approval of the Animal Control Officer.

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## 2024 LIVESTOCK PERMIT APPLICATION

<b>Applicant Name:</b>	
<b>Address:</b>	
<b>Emergency Telephone #:</b>	<b>Email:</b>
Are you the property owner? <input type="checkbox"/> Yes <input type="checkbox"/> No	
For new "stable" applicants: an abutter notification and plot plan are required. Abutters list with consent and plot plan with setbacks must be attached.	
<b>Description of building used to house animals:</b>	
<b>Manure disposal method:</b>	
<b>Name of Veterinary:</b>	<b>Phone #:</b>
<b>Date of last Veterinary visit:</b>	
Have animals received their inoculations within the last 12 months: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Complete list of all livestock	Number of animals

Signature: \_\_\_\_\_ Date: \_\_\_\_\_