

## LIVESTOCK – BEE PERMIT APPLICATION INFORMATION

For the complete regulations ask for a copy or see Natick Board of Health Regulations Chapter 6:

<http://www.natickma.gov/DocumentCenter/View/510>

### Application Process

→ Submit:

- Completed and signed application
- Fee
- Plan/sketch of property with locations and setbacks of all buildings, wells/drains, septic system, bodies of water/streams/wetlands, conservation land, animal housing and fencing
- Zoning Board approval
- Written permission of property owner, if applicant is not the owner
- Provide other documents as may be required (ex. Conservation Commission decision; training)

→ Schedule property inspection with the Health Department

→ Health Department will send notification to abutters with a two week response time

Please Note: Roosters are not allowed. Application for swine must be approved by the Board of Health.

**Livestock must be kept within boundaries of your property**

For bees – provide documentation of training / background / experience

Horses must have at least one acre, excluding buildings, must have adequate size stable/barn

The Town of Natick Animal Inspector will inspect at least annually

All complaints will be investigated

Permits can be revoked at anytime

No change in the type or increase in number of livestock without Board of Health approval

Approved permit is for one year, expiring on April 30, a renewal application will be sent to you

The Health Department, under the direction of the Director of Public Health, will deny or approve applications for a Livestock or Bee Permit, except, if one or more of the following exist, then the application shall be brought before the Board of Health for approval or denial determination:

- 1) If the applicant is denied approval by the Director of Public Health or Health Agent and wants to appeal to the Board
- 2) If the applicant abutters/neighbors disapprove or express concern
- 3) If the application is for swine
- 4) If the Director of Public Health or Health Agent defers to the Board
- 5) If a variance is needed
- 6) If a license has been revoked or denied in the past and the applicant is reapplying
- 7) If the applicant wishes to present to the Board
- 8) If the Board of Health requests the applicant to appear before the Board

A request to be on the agenda for a Board of Health meeting must be made in writing to the above address at least three (3) weeks prior to the meeting.

**Annual Fee**  
**\$50.00 Livestock**  
**\$40.00 Beekeeping**

OFFICE OF THE  
**BOARD OF HEALTH**  
13 EAST CENTRAL ST.  
NATICK, MASSACHUSETTS 01760  
PHONE 508 647-6460 \* FAX 508 647-6466

**APPLICATION FOR LIVESTOCK / BEEKEEPING LICENSE**

To the Licensing Authorities:

The undersigned hereby applies for a License in accordance with the provision of the Statutes relating thereto

**Today's Date:** \_\_\_\_\_

\_\_\_\_\_  
Full Name of Person, Firm or Corporation Making Application

\_\_\_\_\_  
Location by Street and Number in the Town of Natick

\_\_\_\_\_  
Mailing address if different from above

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
List Number and Type of Livestock / Including Number of Bee Hives

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

\_\_\_\_\_  
Signature of Individual or Corporate Name  
(Mandatory)

\_\_\_\_\_  
Corporate Officer  
(Mandatory if applicable)

\_\_\_\_\_  
S.S. # (Voluntary) or Federal I.D.#

**THIS LICENSE WILL NOT BE ISSUED UNLESS THE APPLICANT SIGNS THIS CERTIFICATION CLAUSE.**

Your S.S. # will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax obligations. Licensees who fail to correct their non-filing or delinquency will be subject to License suspension or revocation. This request is made under the authority of Massachusetts G.L. c. 62C s. 49A.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Address

**Please make checks payable to the Town of Natick and mail to: Board of Health, 13 East Central St., Natick MA 01760**

**LIVESTOCK / BEE APPLICATION, cont.**

Provide information to indicate how the property will be maintained including:

|   |
|---|
| <b>Storage of animal feed:</b>                            |
| <b>Removal of waste droppings:</b>                        |
| <b>Limit odors:</b>                                       |
| <b>Pest Control Measures (ex. rodents/insects/flies):</b> |
| <b>Containment of livestock:</b>                          |
| <b>Predator Protection:</b>                               |
| <b>Any additional information:</b>                        |

**Also submitted with this completed and signed application:**

- Fee
- Plan/sketch of property with locations and setbacks of all buildings, wells/drains, septic system, bodies of water/streams/wetlands, conservation land, animal housing and fencing
- Zoning Board approval
- Written permission of property owner and/or other documents as may be required ( for examples: training/experience/background; Conservation Commission decision)

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**Signature**

**Date**