## Board of Health Application for Emergency Permit to Immediately Alleviate Health Threats Caused by Beaver or Muskrat Activity

Tel. No. ( )
eck)
p subject to regulations of Mass Wildlife
ct to Conservation Commission approval
ces subject to Conservation Comm. approval
er wells, wellfields or pumping station rivate way, driveway, railway or airport runway or taxi-way gas generated plants or transmission or distribution structure or ities or other public utilities. blic use of hospitals, emergency clinics, nursing homes, homes for dous waste sites or facilities, incineration or resource recovery trical or gas generation or distribution equipment, cables, alarm stability on property owned by the applicant if such an animal roperty damage, which shall be limited to: buildings and facilities and which prevents normal agricultural practices from being used by flooding or compromised structural ability of commercial thealth department, its chair or agent, the Federal or State thealth or safety exists.

Is the location where the threat to health or safety is occurring different from the address of the applicant? YES
NO
If YES, please list location and property owner name in space provided below.
Location:
Name of Property Owner:
□ Attach Consent Form ( page 3)
PLEASE DO NOT WRITE BELOW THIS LINE FOR BOARD OF HEALTH OFFICE USE ONLY
Date of site visit / / /
Inspector:
Findings:
Application results:
Approve Application for
□ Flood Control
□ Trapping
Permit # expiration date : / / /
Issued to:
Disapprove Application for
□ Flood Control
□ Trapping
An applicant, or his agent, denied an emergency permit may appeal to:
The Department of Public Health Bureau of Environmental Assessment (617) 624-5757



## BELCHERTOWN BOARD OF HEALTH

Lawrence Memorial Hall 2 Jabish Street P.O. Box 670 Belchertown, Massachusetts 01007

Telephone: (413) 323 - 0406 Facsimile: (413) 323 - 9801

Consent Form	
I,	, as owner of the property at
Name ( print)	
	, consent to allow
Street Address or Map and Lot	, consent to anow
	, who is under contract with
Name of Consultant or Licensed Trapper	
	, to enter my property for the purpose of installing water level
devices and/or trapping and removi	ng beavers that are causing a threat to public health and safety as determined
by the Board of Health. I understand	d that any water level control measures or alterations to wetlands or beaver
structures will also be permitted thr	ough the Conservation Commission.
Signature	Date