



CITY OF FRAMINGHAM
Public Health Department



Public Health
Prevent. Promote. Protect.

(508) 532-5470
health@framinghamma.gov
www.framinghamma.gov

MEMORIAL BUILDING
150 Concord Street, Room 205
Framingham, MA 01702

Keeping of Animals Permit Application

New, Renewal & Temporary

Complete the application below. Please print legibly. An incomplete application and/or missing documents may delay the review and issuing a permit.

Note: The keeping of not more than six (6) hens and/or rabbits per parcel of land shall not require a permit provided the animals are registered with the Framingham Public Health Department. To obtain a "Registration Form", visit: https://www.framinghamma.gov/DocumentCenter/View/44880/Keeping-of-Animals-Registration-Form

1. Type of Application

Date: _____

[] New Permit- Complete all sections of this application except Section 6. Permit fee = \$50.00

[] Renewal of Existing Permit - If there are NO changes from your original approved application, complete Sections 1, 2, 3 and 5 below. Permit fee = \$20.00

- If you changed your set-up, type and number of animals etc. from your original approved application, document those changes in the applicable sections below.

[] Temporary Permit - Complete sections 1, 2, 3, 5 & 6 of this application. Do not complete Section 4 and the abutters notification. Permit fee = \$20.00

- Permit for a public event no longer than seven (7) consecutive calendar days.

2. Applicant Information

Name of Applicant: _____

Mailing Address: _____

Phone Number: _____ Emergency Contact Number: _____

Email: _____

Address where animal(s) will be kept: _____ Framingham, MA 0170 _____

Do you own the property where the animals will be kept? [] Yes [] No

[chicken icon] If No, written approval from the property owner indicating permission to keep animals on the property must be submitted with this application.

3. Property Owner Information

Name of Property Owner(s): _____

Mailing Address: _____

Phone Number: _____ Emergency Contact Number: _____

4. Facility Information – Identify on the Plot Plan as well

A. Where will the Facility be located? _____

Requirement: No less than 25 feet from any dwelling of the applicant, not located in the front yard or side yard if bordering a public way AND No less than the minimum setback distances required in the Framingham Zoning Bylaw for animal structure.

For Zoning information, visit: https://www.framinghamma.gov/DocumentCenter/View/30651/Zoning_By-Law

B. What is the distance of the Facility from any Dwelling of an Abutter? _____

Requirement: No less than 75 feet from any dwelling of an abutter.

C. How will the Facility will be secured to prevent animals from escaping? _____

Requirement: All animals shall be confined to the property for which the permit is granted. Animals are not permitted to roam into abutting properties, public spaces, including sidewalks & streets.

D. How will the Facility be constructed to exclude predators & prevent rodents from burrowing into the Facility? _____

E. Describe the design and construction of the Facility floor & grounds: _____

Requirement: Water shall not collect & become stagnant or create a ponding effect on the facility.

F. How will the Facility will be ventilated and protect the animals from the weather? _____

Requirement: Construction or repair of any facility shall comply with applicable sections of the MA State Building Code 780 CMR.

G. Is there a known public drinking water supply source in the area? Yes No

 If Yes, identify the water supply location and distance on the plot plan


Requirement: Facility shall be No less than 200 feet from the high-water mark of public drinking water supply source.

H. Is there a private well on the property? Yes No

 If Yes, identify the well location and distance on the plot plan

Requirement: Facility shall be No less than 150 feet from a private well.

I. Are there Wetlands near / on the property? Yes No

 If Yes, identify the Wetlands and distances on the plot plan

Requirement: No less than 100 feet from any wetland.

5. Animal Information

Type of Animal	Maximum Number of Animals	Enclosed Facility ft ² / Animal	Exercise Yard ft ² / Animal	Pasture Area / Animal

If the number of animals increase or the species of animal changes prior to December 31st, the permit holder MUST notify the department. This does not apply to farmers breeding animals commercially.

6. For Temporary Permits Only, complete the following:

Will water be provided for the animal(s)? Yes No

Describe how the animal(s) will be protected from weather conditions & predators: _____

Will a facility be used? Yes No

If yes, describe the type and location: _____

Describe how the animal(s) will be prevented from roaming into abutting properties, public spaces, including sidewalks & streets: _____

Will food vendors be at the event? Yes No

If yes, briefly describe the location and distance of the animals from the food vendors: _____

Will petting/handling/riding of the animal(s) be allowed? Yes No


If yes, describe how hands will be cleaned: _____

With this application, submit a simple sketch of the event layout identifying the location of the animal(s), the food vendor(s), facility & hand washing station(s).

Describe how animal waste will be cleaned-up and disposed of: _____

For a New Permit, Renewal of an Existing Permit & Temporary Permit, submit the following:

- Completed application. An incomplete application and/or missing documents may delay the review and issuing a permit.









 **\$50.00 for a New Permit**

 **\$20.00 for a Renewal of an Existing Permit**

- Fee:  **\$20.00 for a Temporary Permit** - Permit for a public event no longer than seven (7) consecutive calendar days.

Make check payable to the "City of Framingham". **All fees are nonrefundable.**

For a New Permit and Renewal of an Existing Permit (if changes were made from the original approved application) submit the following:

- Plot plan – A hand drawn plan is acceptable so long as it's of sufficient detail & quality to allow for department's review. The Plot Plan shall include and identify the location of the following:
 -  Area where animals will be kept
 -  Structure(s) including Fence(s)
 -  Septic System(s)
 -  Public Drinking Water Supply Source
 -  Primary Residence & other Dwelling Areas
 -  Abutting Structure(s)
 -  Private Wells
 -  Wetlands
- Written Manure Management Plan

Requirement: Liquid / Solid animal waste shall not be discharged in runoff onto neighbor's properties, public ways, waterways, wetlands & wells.

- Written Feed Management Plan
- Written Pest Management Plan
- Written Plan for the Disposal of Deceased Animals
- Documentation from property owner indicating authorization to keep animals on rental property (if applicable)
- Documented proof of Abutters Notification – See page 5 for "Abutters Notification Form". Not required for renewal or temporary permits.

A list of your abutters can be obtained from the City of Framingham Assessor's Office. See page 6 for the Assessor's "Request for Abutters" form. To receive your abutters list, submitted the completed form to:

**City of Framingham Board of Assessor's - Memorial Building
150 Concord Street
Framingham, MA 01702**

The form can also be obtained online at:

<https://www.framinghamma.gov/DocumentCenter/View/14163/Abutters-Request?bidId=>

Requirement: The definition of an Abutter is the owner of the land or property within 150 feet of the area of the applicant's property where animals are kept. The applicant shall notify all abutters of their intent to keep animals. The form shall be sent by certified mail with return receipt. Written comments from any abutter may be submitted to the department by mail, email or in person with 14 calendar days from the post-marked date of the notification.

Permits expire on December 31st of each year, unless sooner revoked or suspended by the BOH after a hearing. Slaughtering of any animal is prohibited unless conducted in a commercial facility licensed by the US Dept. of Agriculture or MA DPH.

Statement: I, _____ attest to the accuracy of the information provided in this application and fully understand that any deviation from the above without prior approval from the Framingham Public Health Department may nullify the final approval. I affirm to comply with the "Regulation of the Framingham Board of Health Minimum Standards for the Keeping of Animals", all federal, state and local laws, regulations and other requirements, including compliance to Framingham Zoning Bylaws, Framingham General Bylaws, and the Massachusetts Wetlands Protection Act Regulations 310 CMR 10.00. I understand refusal by a permit holder to cooperate with the inspections conducted by the Framingham Public Health Department or Animal Control may result in the suspension of a permit. Pursuant to M.G.L. CH. 62C, § 49A, I certify under the penalties of perjury that to the best of my knowledge and belief have filed all State tax returns and paid all State taxes required under law.

Signature: _____

For Official Use Only

- Approved as submitted
- Approved as submitted with the following conditions: _____

- Disapproved as submitted – Reason(s): ** _____

**** Applicant can resubmit an updated application or provide additional information to address the reason(s) why the application was disapproved.**

Date Reviewed: _____ **Reviewed By:** _____ **Title:** Public Health Inspector

Date Permit was Issued: _____



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Abutters Notification to Keep Animals

Date: _____

Certified Mail Return Receipt Requested: _____
Insert Certified Mail Number

Dear Property Abutter:

My name is: _____, I reside at: _____
Applicants Name Street Address

Framingham, MA. According to the Regulation of the Framingham Board of Health "Minimum Standards for the Keeping of Animals", I am required to notify all abutters within one hundred fifty (150) feet of the area where I intent to keep animals on the property where I reside. I intent to apply for a permit to keep:

Number of Animal(s) Type of Animal(s)

If you have concerns regarding my intent to apply for a permit to keep animals, you may submit your comments to the Framingham Public Health Department by mail, email, or in person within fourteen (14) calendar days from the post-marked date of this notification. If comments are not received within this timeframe, it will be assumed there are no concerns.

Framingham Public Health Department
Mail: Memorial Building
150 Concord Street
Framingham, MA 01702

Email: health@framinghamma.gov

Thank you,

Signature of Applicant: _____



City of Framingham

Memorial Building, 150 Concord Street
Framingham, MA 01702
(508) 532 - 5415

Board of Assessor's Stamp

REQUEST FOR ABUTTERS

Date of Request: _____

Property owner: _____

Property location: _____

Parcel ID: MAP _____ BLOCK _____ LOT _____

Please Specify Radius: _____

Requesting Board/Department: _____

(ABUTTERS LIST WILL BE DELIVERED TO ABOVE REFERENCED BOARD/DEPARTMENT)

APPLICANT INFORMATION:

Name: _____

Address: _____

Phone: _____

Email Address: _____

***FEE: \$45.00 per list (per parcel), payment due at time of request. Check is payable to CITY OF FRAMINGHAM.**

(* additional fee(s) may apply, if non-standard list is requested)

THE LIST IS VALID FOR 90 DAYS FROM CERTIFICATION DATE. BOARD OF ASSESSORS RESERVES 10 WORKING DAYS TO PROVIDE ALL CERTIFIED LISTS OF ABUTTERS.

November 15, 2018