



TOWN OF UXBRIDGE

Board of Health

21 South Main Street

Uxbridge, Massachusetts 01569

Telephone: (508) 278-8600 Ext.8

boh@uxbridge-ma.gov

NOTICE OF INTENT TO FILE APPLICATION FOR PERMIT TO KEEP ANIMALS

To all abutters to the property located at _____ in Uxbridge, Massachusetts, you are hereby notified, pursuant to the RULES AND REGULATIONS RELATIVE TO THE KEEPING, RAISING AND EXHIBITION OF ANIMALS WITHIN THE TOWN OF UXBRIDGE, of the intent to submit an application for a permit to keep _ _____ on the property located at the above address.

Please submit any comments or concerns to the Board of Health Office no later than the close of business (5:00 p.m.) on _____ so that any comments will be included with this application.

NAME OF APPLICANT