

**TOWN OF MONTEREY**

**BOARD OF HEALTH**

**APPLICATION FOR BEAVER REMOVAL PERMIT**

Property Owner \_\_\_\_\_ Date \_\_\_\_\_

Site Address \_\_\_\_\_

Perceived Threat to Health and Safety \_\_\_\_\_

\_\_\_\_\_

Is the problem entirely on your property?  Yes  No

If no, list owners & addresses of other properties

\_\_\_\_\_

\_\_\_\_\_

Do you have a written contract with the Trapper  Yes  No

Name of State Licensed Trapper to perform services \_\_\_\_\_

License Number of Trapper \_\_\_\_\_

\_\_\_\_\_  
Signature of Trapper (required)

Other Comments \_\_\_\_\_

\_\_\_\_\_

**Conditions:** Any disturbance within a wetland, such as the breaching of a dam or the installation of water leveling devices, may only be performed with the permission of the Conservation Commission.

Other Conditions: \_\_\_\_\_

\_\_\_\_\_

Board of Health Approval \_\_\_\_\_ date \_\_\_\_\_  
Signature

**THIS PERMIT IS GOOD FOR 10 DAYS AFTER THE DATE OF BOARD OF HEALTH APPROVAL.**

It is suggested that the Trapper carry a copy of this completed form while on the property.