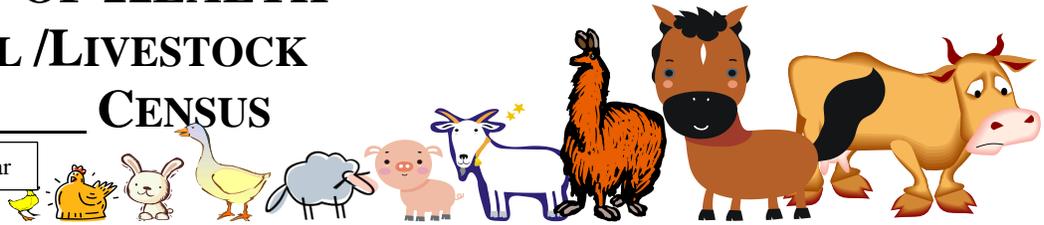


BOARD OF HEALTH

ANIMAL /LIVESTOCK

CENSUS

fill in year



In an effort to provide better service to animal owners we ask that you complete this census. It will facilitate the return of straying or lost animals to their rightful owner.

Owner's Name: _____

Phone: _____

Address: _____ Apt# _____

Email: _____

Mailing Address: _____
(if different from home address)

Farm Name: _____

If you have any of the animals below please indicate how many.

If you intend to acquire any this year – please write the month and amount. Example: October – 6 Rabbits.

_____ Dairy Cattle	_____ Sheep	_____ * Horses	_____ Rabbits	_____ Geese
_____ Beef Cattle	_____ Swine	_____ * Ponies	_____ Chickens	_____ Ducks
_____ Steer/Oxen	_____ Alpaca	_____ Llamas	_____ Turkeys	_____ Goats
_____ * Donkeys/Mules	_____ Other (please list) _____	_____ Exotics (please list)		

* An Annual Stable License is required for these animals. Please contact to Board of Health for information.

Please Return Form to: Board of Health, 380 Great Rd, Stow, MA 01775 978-897-4592