



LICENSE _____
FEE: \$150.00

**TOWN OF YARMOUTH BOARD OF HEALTH
2023/2024 HANDLING AND STORAGE OF TOXIC OR HAZARDOUS MATERIALS
LICENSE APPLICATION**

**PLEASE COMPLETE THIS APPLICATION AND RETURN IT WITH THE LICENSE FEE BY
JUNE 30, 2023**

PLEASE COMPLETE ALL QUESTIONS

NAME OF BUSINESS _____ BUSINESS TEL. # _____

BUSINESS ADDRESS IN YARMOUTH _____

MAILING ADDRESS _____

EMAIL ADDRESS _____

MANAGER/CONTACT PERSON _____ HOME TEL. # _____

OWNER NAME _____ HOME TEL. # _____

HOME ADDRESS _____

CORPORATION NAME (IF APPLICABLE) _____ TEL. # _____

CORPORATION ADDRESS _____

MAILING ADDRESS _____

TAX ID (FEIN OR SSN) **REQUIRED** _____

LICENSES RUN ANNUALLY FROM JULY 1 TO JUNE 30. IT IS YOUR RESPONSIBILITY TO RETURN THE COMPLETED APPLICATION(S) AND REQUIRED FEE(S) BY JUNE 30. FAILURE TO DO SO WILL RESULT IN CLOSURE OF YOUR ESTABLISHMENT UNTIL THE REQUIRED APPLICATION(S) AND FEE(S) ARE RECEIVED. A HEARING BEFORE THE BOARD OF HEALTH MAY BE REQUIRED PRIOR TO REOPENING.

Town of Yarmouth taxes and liens must be paid prior to renewal or issuance of your permits. Please check appropriately if paid: yes no n/a

Under Chapter 152, Sec. 25C, subsection 6, the Town of Yarmouth is required to hold issuance or renewal of any license or permit to operate a business if a person or company does not have a Certification of Workers Compensation insurance. As part of renewal or issuance of your permits, you must **complete the enclosed Workers Compensation Affidavit**. If not applicable, please explain:

REGISTRATION FORM SIGNED AND COMPLETED
CHECK AND WORKERS COMP AFFIDAVIT ENCLOSED

Y N

ALL SAFETY DATA SHEETS ON FILE

Y N

ANY NEW CHEMICALS MUST BE PRE-APPROVED BY THE HEALTH DEPARTMENT.

RENEWAL APPLICATION _____ NEW APPLICATION _____

APPLICANT'S SIGNATURE _____

DATE _____