Billerica Board of Health

Town Hall
365 Boston Road
Billerica, MA 01821
Phone: 978-671-0931
Fax 978-671-0919
Web Site www.town.billerica.ma.us

APPLICATION FOR FUNERAL DIRECTOR

Pursuant to Billerica Board of Health Regulations Chapter 1, Section 1.6.001

PLEASE PRINT

FEE $ 50.00

_____NEW _____RENEWAL DATE_____

NAME OF APPLICANT _____

ADDRESS OF APPLICANT _____

TELEPHONE NUMBER _____

PLACE OF EMPLOYMENT _____

ADDRESS OF EMPLOYMENT _____

TELEPHONE NUMBER _____

E-MAIL ADDRESS _____

STATE LICENSE NUMBER _____

INCOMPLETE APPLICATIONS WILL DELAY FURTHER REVIEW AND PROCESSING

Pursuant to Billerica Health Regulations, Chapter 1, Section 1.9.001 this application is subject to a thirty (30) day review and approval period.

LATE RENEWALS WILL BE ASSESSED A LATE FEE IN ACCORDANCE WITH THE MOST CURRENT BOARD OF HEALTH FEE SCHEDULE. LATE FEES ARE EQUAL TO THE ORIGINAL PERMIT FEE. FAILURE TO TAKE APPROPRIATE ACTION TO RENEW PERMITS MAY RESULT IN ADDITIONAL FEES OR FINES TO BE IMPOSED OR OTHER ADMINISTRATIVE ACTION.

Pursuant to Massachusetts General Law Chapter 62C, Section 49A, I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

_____
Print Name of Applicant

_____
Signature of Applicant **Date**

RECEIVED