

**TOWN OF HEATH**

Massachusetts



**BOARD OF HEALTH**

**Application for Temporary Occupancy Permit**  
Authorized by the Massachusetts Public Housing Code 105CMR410.440

Permit Period: May 1, 2024 to April 30, 2026

**FEE FOR A TWO-YEAR PERMIT IS \$50.00 PER TEMPORARY DWELLING**  
**PLEASE MAKE CHECKS PAYABLE TO: THE TOWN OF HEATH**

Temporary dwellings in the Town of Heath are required to be permitted. A copy of the Temporary Occupancy Regulation can be accessed at <https://townofheath.org/p/97/Temporary-Occupancy-Permitting>. Each dwelling requires a separate occupancy permit. Once the permit application is received with the proper fee (\$50.00 per dwelling) you will be mailed your Temporary Occupancy Permit(s) for the current period. Contact the Board of Health Clerk with any questions:  
**boh@townofheath.org**

Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Home phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

Property in Heath where the temporary dwelling/camper is located:

Street Address: \_\_\_\_\_

Unit/Block/Lot (if applicable): \_\_\_\_\_

Anticipated Dates of Occupancy:

Weekend/s \_\_\_\_\_ Week/s of \_\_\_\_\_ Month of \_\_\_\_\_

All wastewater must be properly disposed of in an approved dumping station or septic system.

Method of Waste Disposal:

Black Water: \_\_\_\_\_

Gray Water: \_\_\_\_\_

**Trailer 1:** Make & Model: \_\_\_\_\_ VIN No: \_\_\_\_\_

Length: \_\_\_\_\_ Width: \_\_\_\_\_ Fee: \_\_\_\_\_

**Trailer 2:** Make & Model: \_\_\_\_\_ VIN No: \_\_\_\_\_

Length: \_\_\_\_\_ Width: \_\_\_\_\_ Fee: \_\_\_\_\_

OTHER: \_\_\_\_\_

**Total Fee Enclosed:** \_\_\_\_\_

*Please return the form and payment to:*

***Heath Board of Health  
P.O. Box 35 Heath, MA 01346***

***Make checks payable to: The Town of Heath***

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date