

FOR BOARD OF HEALTH	DATE RECEIVED:	DATE ISSUED:	PERMIT NO. FUN -	YEAR 2012/ 2013
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# APPLICATION FOR PERMIT TO OPERATE AS A FUNERAL DIRECTOR

CASH

CHECK



NORTHAMPTON BOARD OF HEALTH  
212 MAIN STREET  
NORTHAMPTON, MA 01060  
(413) 587 - 1214

**PERMIT FEE:**  
  
**\$100.00** per Director

Date: \_\_\_\_\_

Establishment Name: \_\_\_\_\_

Establishment Address: \_\_\_\_\_

Mailing Address (If different) \_\_\_\_\_

Establishment Telephone Number: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

**List Each Funeral Director:**

<u>Name</u>	<u>Title</u>	<u>Home Address</u>

**In accordance with the provisions of the Statutes relating thereto, application for a Funeral Director Permit is hereby made to operate as a FUNERAL DIRECTOR in Northampton, Massachusetts.**

\_\_\_\_\_  
Signature of Owner or Corporate Officer

\_\_\_\_\_  
Social Security or Federal ID #

\_\_\_\_\_  
Telephone #

\_\_\_\_\_  
Date of Appointment

**PLEASE MAKE ALL CHECKS PAYABLE TO THE CITY OF NORTHAMPTON**