



**CITY OF PEABODY
DEPARTMENT OF HUMAN SERVICES**

**24 Lowell Street
Peabody, Massachusetts 01960
(978) 538-5926
Fax: (978) 538-5990**

**SHARON CAMERON
DIRECTOR**

**BOARD OF HEALTH
BERNARD H. HOROWITZ,
CHAIRMAN
THOMAS J. DURKIN III
LEIGH ANN MANSBERGER, MD, MPH**

The Commonwealth of Massachusetts

CITY OF PEABODY

Board of Health

The undersigned hereby makes application for a license as a
FUNERAL DIRECTOR
in the City of Peabody for the year ending April 30th, 2018.

Name: _____
Please print name

Signed: _____

Date: _____ License Number: _____

Name and location of place of business:

List any other facilities and addresses where you are engaged:

Fee: \$50.00 Please make check payable to 'City of Peabody', and return by
April 1st, to the Peabody Board of Health,
24 Lowell Street, Peabody, MA 01960.