

TOWN OF NORTH ANDOVER
Office of COMMUNITY DEVELOPMENT AND SERVICES
HEALTH DEPARTMENT
1600 OSGOOD STREET; BUILDING 20; SUITE 2-36
NORTH ANDOVER, MASSACHUSETTS 01845



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Public Health Director

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APPLICATION FOR SUNTANNING BED OPERATOR'S LICENSE

NAME:

ADDRESS:

CONTACT PHONE NUMBERS:

E-MAIL / WEBSITE:

LOCATION OF BUSINESS:

DAYS & HOURS OF OPERATION:

SS# OR FEDERAL ID#:

FEE: \$85.00 Payable to: Town of North Andover
LATE FEE AFTER JANUARY 1st WILL DOUBLE THE COST - \$170.00