

**Town of Sandwich**  
The Oldest Town on Cape Cod



**Health Department**  
16 Jan Sebastian Drive  
Sandwich, MA 02563  
(508) 888-4200  
Fax: (508) 833-0018

**2022**  
**APPLICATION FOR**  
**SEMI PUBLIC BATHING BEACH LICENSE**

Name of Beach: \_\_\_\_\_

Owners/Home Owners Association: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

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

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

Name of Laboratory Conducting Analysis: \_\_\_\_\_

Date of Beach Opening: \_\_\_\_\_

Date of Beach Closure: \_\_\_\_\_

Do you need a Beach Posting Sign: Yes \_\_\_\_\_ No \_\_\_\_\_

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There is no fee for this permit

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I, as the owner/operator of the referenced beach understand that the beach will be operated in compliance with 105 CMR 445.000 Minimum Standards for Bathing Beaches.

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