



Town of Salem, New Hampshire

Health Department

Municipal Offices, 33 Geremonty Drive, Salem, New Hampshire 03079

tel: (603) 890-2050 fax: (603) 898-1223

SALVAGE YARD APPLICATION

Application for a License to operate, establish or maintain a Salvage Yard and/or Automotive Recycling Yard within the Town of Salem. This license is issued in accordance with NH RSA 236:90-100 and all applicable local regulations.

1. BUSINESS NAME _____
LICENSEE/OWNER _____
BUSINESS ADDRESS _____
MAILING ADDRESS (if different) _____

PHONE NUMBER _____
2. Is this application a result of a proposed transfer of ownership of an existing Salvage Yard ? ___yes ___no
3. Describe the land to be used for the salvage yard, referring to permanent boundary markers including approximate total parcel acreage as well as salvage storage acreage. Attach a sketch plan showing the above information in relation to other Town landmarks. _____

4. Existing or proposed Salvage Yard? Specify: _____
5. If existing, provide the date when the Salvage Yard was started: _____
6. Describe the type of operations: (automobile graveyard, scrap metal recycling Operation, storage of junk, garbage dump, sanitary fill or other) _____

7. Distance from junk storage area to the nearest edge of the right-of-way of the the Interstate, Federal-Aid Primary Highway or Turnpike: _____
8. Is the Salvage Yard storage area presently visible from the street? _____
9. Is there compliance to local zoning ordinances? Yes No
10. If answer is "yes", within what zone is the Salvage Yard located? _____

11. Are you presently licensed with the State of NH? ____ Yes ____ No

12. If the answer is "yes", when does your license expire? _____

**A LICENSE FEE OF \$25 SHALL BE FORWARDED WITH THIS APPLICATION.
MAKE CHECKS PAYABLE TO THE TOWN OF SALEM
LICENSING PERIOD IS APRIL 1 ST TO MARCH 31ST**