



# NAVAJO COUNTY PUBLIC HEALTH DISTRICT



## PERMIT APPLICATION TO OPERATE AN ESTABLISHMENT

MAIN OFFICE  
117 EAST BUFFALO  
HOLBROOK, AZ 86025  
PHONE: 928.524.4750  
FAX: 928.524.4754

SHOW LOW OFFICE  
600 NORTH 9<sup>TH</sup> PLACE  
SHOW LOW, AZ 85901  
PHONE: 928.532.6050  
FAX: 928.532.6054

PLEASE PRINT CLEARLY OR TYPE INFORMATION

TYPE OF ESTABLISHMENT (check "✓" all that apply):     Temporary Food Service     Restaurant     Retail  
 Bar/Lounge     Pool/Spa     Mobile     Hotel/Motel     Campground/RV/Trailer Park     Plan Review  
 Potable Water Hauler     Waste Water Hauler     Not for Profit – Tax Exempt Status, Exemption # \_\_\_\_\_

### ESTABLISHMENT INFORMATION

ESTABLISHMENT'S NAME: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_ **AZ** \_\_\_\_\_  
(NUMBER and STREET) (CITY) (ZIP CODE)  
\_\_\_\_\_  
(PHONE NUMBER) (FAX NUMBER)

MAILING ADDRESS: \_\_\_\_\_ **AZ** \_\_\_\_\_  
(NUMBER and STREET or PO BOX) (CITY) (ZIP CODE)

### OWNER / CORPORATION INFORMATION - FOR BILLING PURPOSES

OWNER or CORPORATION NAME: \_\_\_\_\_

OWNER OR CORPORATION MAILING ADDRESS:  
\_\_\_\_\_  
(NUMBER and STREET or PO BOX) (CITY) (STATE) (ZIP CODE)  
\_\_\_\_\_  
(PHONE NUMBER) (FAX NUMBER)

OWNER OR CORPORATION CONTACT EMAIL: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

\*\*\* TURN OVER TO COMPLETE APPLICATION \*\*\*

**CHECK (√) ALL THAT APPLY**

√	FEE NAME	FEE CODE	PERMIT FEE
	Restaurant, 1-30 seats	EH-1	\$200.00
	Restaurant, 31+ seats	EH-2	\$300.00
	Food Service, Temporary (1-5 days)	EH-3	\$ 50.00
	Food Service, Temporary (6+ days)	EH-4	\$ 75.00
	Caterer/Commissary	EH-5	\$300.00
	Daycare (Sanitation)	EH-6	\$ 50.00
	Food Warehouse	EH-7	\$100.00
	Mobile Food Vendor	EH-8	\$200.00
	Bar/Lounge	EH-9	\$150.00
	Bar/Lounge in a Restaurant	EH-10	\$150.00
	Swimming Pool / Spa	EH-11	\$100.00
	Potable Water Hauler	EH-12	\$100.00
	Continental Breakfast	EH-13	\$ 50.00
	Retail Food	EH-14	\$150.00
	Meat Establishment	EH-15	\$100.00
	Bakery	EH-16	\$150.00
	Delicatessen	EH-17	\$150.00
	Hotel/Motel, 1-30 rooms (Simple)	EH-18	\$175.00
	Hotel/Motel, 31+ rooms (Complex)	EH-19	\$300.00
	Campground/RV/Trailer Park	EH-20	\$175.00
	Waste Water Hauler	EH-21	\$100.00
	Limited Retail	EH-22	\$ 50.00
	Notice of Violation w/One Inspection	EH-23	\$100.00
	Re-Inspection Fee (per inspection)	EH-24	\$100.00
	Late Notice Issuance Fee	EH-25	\$ 50.00
	Plan Review – Fixed Establishment, 1-30 seats	EH-26	\$150.00
	Plan Review – Fixed Establishment, 31-100 seats	EH-27	\$175.00
	Plan Review – Fixed Establishment, 101+ seats	EH-28	\$200.00
	Plan Review – Fixed Establishment Remodel	EH-29	\$150.00
	Plan Review – Mobile Food Service	EH-30	\$150.00
	Plan Review – Retail Food, 1 - 2,000 sq.ft.	EH-31	\$150.00
	Plan Review – Retail Food, 2,001+ sq.ft.	EH-32	\$175.00
	Additional Plan Check Reviews	EH-33	\$ 50.00

Dear Applicant:

Your application has been evaluated with the following code(s): \_\_\_\_\_

The fee total of \$ \_\_\_\_\_ is due immediately. If not paid within 30 calendar days, a late fee may be assessed. Please mail this form along with your check and/or money order payable to the *Navajo County Public Health Services District* to:

NAVAJO COUNTY HEALTH DEPARTMENT  
 ATTN: ESTABLISHMENT PERMITS  
 117 EAST BUFFALO STREET  
 HOLBROOK, AZ 86025

After we receive and process your application and payment, your permit will be issued. If you do not receive your permit within 14 calendar days, please contact the Navajo County office at (928) 524-4750.

Thank-you,

\_\_\_\_\_  
 Environmental Health Inspector

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**DEPARTMENT USE ONLY**

Type of Payment Rec'd:  Cash       Check # \_\_\_\_\_       Money Order # \_\_\_\_\_

Date Permit Issued: \_\_\_\_\_      Permit #: \_\_\_\_\_      Approved by: \_\_\_\_\_

