



COCONINO COUNTY
PUBLIC HEALTH SERVICES DISTRICT
ENVIRONMENTAL SERVICES

Office Use Only:
Date:
Received by:
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Intake Form: Health Services Licensed Operations

Plan Review is required for the following: New Construction, New Owners of Existing Establishments, or Tenant Improvements as part of the licensing process. Certain "public operations" are required to operate under a "health license" or "health permit" which is issued when the operation is found in compliance with State and/or County Health Rules and Regulations. In some instances, more than one health license may be required.

There are several steps for obtaining or maintaining a Health License/Permit. In order to serve you better, please provide the following information in the spaces below. When this form is returned to Environmental Services an inspector or the plans examiner will contact you within five (5) County business days and assist you further.

PLEASE PRINT CURRENT CONTACT INFORMATION:

NAME:
NAME OF NEW ESTABLISHMENT:
NAME OF PREVIOUS ESTABLISHMENT:
ADDRESS OF ESTABLISHMENT:
CITY: STATE: ZIP:
MAILING ADDRESS:
CITY: STATE: ZIP:
PHONE: (WK) (CELL/OTHER)
FAX: EMAIL:

PLEASE CHECK 3 ALL CATAGORIES THAT APPLY:

- Restaurant, Bakery, Meat Market, Deli, Snack Bar, Mobile Food Unit, Caterer, Bar, Grocery, Continental Breakfast, Coffee Shop, Hotel/Motel/Hostel/B&B, Pool/Spa, Trailer Park/RV Park, Campground/Picnic Ground, School, Food Processor, Remodeling

I, the undersigned, have read and understand the information above. I have completed the intake form to the best of my ability, and understand that this is just the first step towards obtaining or maintaining an operating license. I additionally understand I will be required to submit plans and specifications for review for any construction or alterations I have planned and/or alterations identified by the Environmental Health Specialist upon inspection of the specified operation(s).

Signature: Date: