

ENVIRONMENTAL HEALTH SERVICES APPLICATION

Brunswick County Health Services, Environmental Health Section

25 Courthouse Drive NE ▪ P. O. Box 9

Bolivia, NC 28422

(910)253-2150

Email: flplans@brunswickcountync.gov

Applicant Name: _____

Address: _____

Telephone: _____ Email: _____

Name of Establishment: _____

Address: _____

Telephone: _____ Email: _____

TYPE OF ESTABLISHMENT:

_____ Residential Care

_____ Summer Camp

_____ Adult Day Service

_____ Limited Food Service (LFE)*

_____ School Building

_____ Resident Camp

_____ Nursing Home

_____ Senior Nutrition Site

*Type of LFE: Amateur Athletic Organization Lodging Facility

*LFE applicants must include \$75 annual application fee, plans, equipment specifications, menu and dates/hours of operation.

UTILITIES:

Water Supply: _____ County/Community _____ Private Well*

*Private water supply wells must comply with the construction requirements of 15A NCAC 18A .1700 and 15A NCAC .0100 2C.

Sewage Disposal: _____ County/Community _____ On-Site System*

*On-site wastewater systems must be specifically approved for the proposed use and permitted by the Department or other Regulatory Agency.

PLANS:

Submit the following items to the address above to begin the review process:

_____ Floor plan drawn to scale (1/4" = 1' Minimum) which identify location of all proposed rooms, equipment, plumbing fixtures, laundry, storage areas and recreational waters (if applicable).

_____ Equipment specifications (make/model) for all food service and laundry equipment.

_____ Finish schedule for each room:

	FLOORS	WALLS	CEILINGS
Kitchen			
Serving/Dining			
Bathrooms			
Bedrooms			
Storage			
Laundry			

See applicable rules for specific requirements <https://ehs.ncpublichealth.com/rules.htm>
Applicant may need to contact other County/City agencies for additional requirements.

Name (Print/Sign): _____

Title: _____

Date: _____