



An annual license fee determined by the licensor in accordance with section 3709.09 of the Ohio Revised Code may be levied upon each facility for the operation costs associated with enforcement of the program rules.

For license renewal, return the completed application before May 1st pursuant to section 3729.05 (A)(1) of the Ohio Revised Code. If payment of a fee established under section ORC 3709.09 (D) is not postmarked or received by the day on which payment is due, the board of health shall assess a penalty.

Facility Name: Health District:
Street Address: Directions: (please print):
1. Complete one application for each licensed establishment;
2. Sign and Date the application
3. Attach a check or money order and return according to the information listed below.
City/Zip:
Phone #: E-mail:
Owner/ Licensee:
Street Address:
City/ State /Zip:
Phone #: E-mail:
# of park/camp sites per approved plans: Water Supply: [ ] Community [ ] On site [ ] Other:

Person to Contact regarding inspections, maintenance, or emergencies, if different from licensee:

Name: Phone # / E-mail:

I hereby certify that I am the licensee, or the authorized representative of the establishment listed above, and agree to abide by the rules that apply for this license. I certify that the information provided is a true and accurate statement of the facts.

Signature: Phone #: Date:

Check or money order for the license fee, payable to:

Return the fee and application to:

(Licensor to complete: either pre-printed, or with a label or stamp)
Health District:
Street address:
City:
Zip: Phone #:

LOCAL LICENSING AUTHORITY TO COMPLETE BELOW

Table with 4 columns: License fee (LHD), State program fee, Late fee, Total amount due. Includes plus and equals signs and dollar signs.

1 If the license fee is not post marked by the application due date a 25% penalty- late fee shall be assessed.

Application approved for license as according to the applicable sections of the Ohio Revised Code

Processor: Date received: Date processed:
License Audit no. Health District License no.