Permit Application

Santa Cruz County Environmental Health Department
2150 N. Congress Drive, Suite #115
Nogales, AZ 85621
(520)375-7900

Plan Review Fee Paid (Yes/No): _____

☐ New Owner ☐ New Establishment ☐ New Location ☐ Other _____	☐ Individual ☐ Partnership ☐ Corp./Firm ☐ School ☐ Church	**Sewage Disposal:** ☐ On Site ☐ Public Sewer **Potable Water:** ☐ Individual Well ☐ Public	**Type of Establishment:** ☐ Food ☐ Bar ☐ Swimming Pool ☐ Hotel, Motel, Bed & Breakfast, Trailer Park, RV Park ☐ Other _____

Establishment/Business Name	Establishment Street Address	City	State	Zip Code

Establishment Telephone Number	Establishment Mailing Address	City	State	Zip Code

Owners Name	Owners Address	City	State	Zip Code

Co-Owner's Name	Co-Owners Address	City	State	Zip Code

I/We assume complete responsibility for the business to be carried on at the premises for which I/We am/are making this application for a permit. I/We agree that all of said business at the said premises will be conducted in full accordance with all sanitary regulations applicable thereto, and with all county, state, and local laws, rules and ordinances pertaining thereto.

_____ _____
Applicant Name Home Address

_____ _____ _____ _____
Signature Email Date Phone

THIS SECTION IS FOR DEPARTMENT USE ONLY:

Permit #: _____ Issue Date: _____

Application/Plans: ☐ Approved ☐ Disapproved

By: _____
Sanitarian's Signature

Comments: _____
_____

Revised: 12/22/2014