

## **DURHAM COUNTY ENVIRONMENTAL HEALTH Service Request Form**

New School racinty New Management	New School Facility	New Management
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Please note: scheduling may take up to 30 days from the date of request.

## **Please Complete The Following Information:**

Please Print		
School Name:		
School Manager	Telephone ()	
Email:		
Physical Address: Street		
	Zip:	
Number of Students:	Age of Students:	
Water Supply: Well*	Public Water Supply City	
Waste Disposal: Septic Syste	m* Municipal sewer	
Will there be food preparation If yes, a food service plan revi- *Additional application, fees a	ew application is required. and water sampling required	
Include a scale drawing of the	•	
Business office:	Phone: ()	
	Thome. (	
	Zip:	
Applicant Name:		
Applicant Telephone: ()	Cell: ()	
Email:		
Signature of Applicant:	Date	