

In Cooperation with the
State Department of Health



1138 Rose Hill Drive . PO Box 7546
Charlottesville, Virginia 22906

Albemarle—Charlottesville
Fluvanna County (Palmyra)
Greene County (Stanardsville)
Louisa County (Louisa)
Nelson County (Lovingston)

Phone (434) 972-6219
Fax (434) 972-4310

REQUEST FOR INSPECTION

NAME OF FACILITY: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

DIRECTIONS TO FACILITY: _____

NAME OF PERSON MAKING THE REQUEST: _____

CONTACT PERSON: _____

TELEPHONE NUMBERS: _____

TYPE OF INSPECTION NEEDED:

<input type="checkbox"/>	WATER
<input type="checkbox"/>	SEWAGE
<input type="checkbox"/>	FOOD SERVICE/KITCHEN
<input type="checkbox"/>	OTHER (specify) _____

NAME OF AGENCY REQUESTING HEALTH DEPARTMENT INSPECTION

INSPECTIONS WILL BE SCHEDULED WITHIN 30 DAYS OF RECEIPT OF REQUEST.