



THOMAS JEFFERSON HEALTH DISTRICT
Environmental Health Services
1138 Rose Hill Drive, Charlottesville, VA 22903
P.O. Box 7546, Charlottesville, VA 22906
(434) 972-6219 (Office)
(434) 972-4310 (Fax)

REQUEST FOR INSPECTION

NAME OF FACILITY: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

DIRECTIONS TO FACILITY: _____

NAME OF PERSON MAKING THE REQUEST: _____

CONTACT PERSON: _____

TELEPHONE NUMBERS: _____

EMAIL: _____

TYPE OF FACILITY:

Licensed Child Care/Preschool/School/Program

prepares/serves meals

does not serve meals (i.e., serves snacks only or none at all)

Religious Exempt Child Care/Preschool/School/Program

prepares/serves meals

does not serve meals (i.e., serves snacks only or none at all)

Adult Care Facility/Program

prepares/serves meals

does not serve meals (i.e., serves snacks only or none at all)

Other: _____

Please Note

- If facility's drinking water supply comes from a private well, you must provide a copy of a recent water sample report at the time of inspection.
- Inspections will be scheduled within 30 days of receipt of request.