



Fee Schedule For Environmental Health Services

Niagara County Department of Health

Complete all sections of this application (except "For Office Use Only" section).
Check the type of service or permit being applied for and all applicable fees.

Niagara County Department of Health
Attn: Environmental Health Division
55 Stevens St.
Lockport, New York 14094-1894

***Mail this form and any other
required application forms to:***

All checks or money orders payable to:
Niagara County Department of Health

Credit Card Payments may be made in person at the Niagara County Health Dept.
during normal business hours. Note additional fees apply. See Other Fees below.

APPLICANT	
Name : Mr. / Mrs. / Ms. / Miss	Phone No.
Mailing Address (P.O. Box if Applicable)	City, State, Zip
ESTABLISHMENT	
Name	Facility Code #
Street Address	City, State, Zip
City / Town / Village of	Phone No.
OTHER FEES	<p><i>* A \$20.00 service charge will be charged when a check is returned for insufficient funds.</i></p> <p><i>* A late fee of 50% of the permit fee is charged to ALL permitted facilities that do not remit their fee prior to expiration of the existing permit.</i></p> <p><i>* Temporary permits require application and fee 15 days prior to the first day of operation or a late fee of 50% will be charged.</i></p> <p><i>* Payment by Credit Card will incur a Convenience Fee of \$3.00 up to \$100.00 then 3% for anything \$100.01 and over.</i></p>

Check Appropriate Box(s) and Enter Total Fee on bottom of side (2) ↓

ENV ID	PERMIT CATEGORY	CHECK BOX <input type="checkbox"/>	↓	FEE
100	Food Protection:			
101	Food Service - Inspection & Permit: - Temporary (less than 15 consecutive days)	<input type="checkbox"/>		\$50.00
102	- Temporary (less than 15 consecutive days) Frozen Dessert	<input type="checkbox"/>		\$15.00
103	- Multiple Temporary (180 consecutive days)	<input type="checkbox"/>		\$215.00
104	- Mobile Food Vendor (annual)	<input type="checkbox"/>		\$210.00
105	- Low Risk (annual)	<input type="checkbox"/>		\$155.00
106	- Medium Risk (annual)	<input type="checkbox"/>		\$260.00
107	- High Risk (annual)	<input type="checkbox"/>		\$365.00
108	Food Service Plan Review	<input type="checkbox"/>		\$185.00
109	Frozen Dessert: - Inspection & Permit	<input type="checkbox"/>		\$25.00
110	- Initial Sample & Analysis (max charge \$180) \$18 per sample X _____ Samples =	<input type="checkbox"/>		
111	- Resample & Analysis (per prior unsatisfactory) \$18 per sample X _____ Samples =	<input type="checkbox"/>		
112	Vending Machine Inspection & Permit \$18 per machine X _____ Machines =	<input type="checkbox"/>		
200	Camps and Recreation:			
201	Children's Camp Inspection & Permit	<input type="checkbox"/>		\$200.00
202	Motel/Hotel - 1 - 25 Rooms	<input type="checkbox"/>		\$200.00
203	Inspection & Permit: - 26 - 50 Rooms	<input type="checkbox"/>		\$250.00
204	(SELECT NUMBER OF ROOMS & PAY AMOUNT SHOWN) - 51+ Rooms	<input type="checkbox"/>		\$335.00
205	- Swimming Pool (additional cost - per filtration system) Includes Initial Sample and Analysis	<input type="checkbox"/>		\$195.00
206	- Resample & Analysis (per prior unsatisfactory)	<input type="checkbox"/>		\$50.00
207	Motel / Hotel: Plan Review & Approval	<input type="checkbox"/>		\$265.00
208	Campsite - 1 - 50 Sites	<input type="checkbox"/>		\$200.00
209	Inspection & Permit: - 51 - 100 Sites	<input type="checkbox"/>		\$250.00
210	(SELECT NUMBER OF SITES & PAY AMOUNT SHOWN) - 101+ Sites	<input type="checkbox"/>		\$325.00
211	- Swimming Pool (additional cost - per filtration system) Includes Initial Sample and Analysis	<input type="checkbox"/>		\$195.00
212	- Resample & Analysis (per prior unsatisfactory)	<input type="checkbox"/>		\$50.00
213	Plan Review Campsite (per lot): \$40 x _____ lots or sites =	<input type="checkbox"/>		

(Continued on Reverse)

ENV ID	PERMIT CATEGORY	CHECK BOX	↓	FEE
214	Bathing Beach: - Annual Inspection & Permit	<input type="checkbox"/>		\$150.00
215	- Weekly Sampling & Analysis	<input type="checkbox"/>		\$40.00
216	Swimming Pool: - Inspection & Permit (per filtration system) Includes Initial Sample and Analysis	<input type="checkbox"/>		\$215.00
217	- Resample & Analysis (per prior unsatisfactory)	<input type="checkbox"/>		\$50.00
218	- Plan Review	<input type="checkbox"/>		\$265.00
300 Housing Hygiene:				
301	Migrant Labor Camp: - Inspection & Permit; 1 - 20 Migrants	<input type="checkbox"/>		\$170.00
302	21+ Migrants	<input type="checkbox"/>		\$225.00
303	Rooming House Inspection & Permit	<input type="checkbox"/>		\$200.00
304	Bed & Breakfast Inspection & Permit	<input type="checkbox"/>		\$200.00
400 Community Sanitation:				
401	Mobile Home Park: Plan Review - (per lot) \$55 x _____ lots =	<input type="checkbox"/>		
402	Mobile Home Park & Permit: Inspection - 5 - 50 Lots	<input type="checkbox"/>		\$195.00
403	NUMBER OF LOTS & PAY (SELECT - 51 - 100 Lots	<input type="checkbox"/>		\$250.00
404	AMOUNT SHOWN) - 101 + Lots	<input type="checkbox"/>		\$325.00
405	Realty Subdivision Plan Review - (per lot) \$55 x _____ lots =	<input type="checkbox"/>		
406	Private Well Water Supply: - Inspection (includes bacteriological sampling & analysis)	<input type="checkbox"/>		\$75.00
407	- Plan Review (includes bacteriological sampling & analysis)	<input type="checkbox"/>		\$140.00
408	Private Sewage Disposal System: - Design Plan Review	<input type="checkbox"/>		\$290.00
409	- Design, Inspection & Construction Certification	<input type="checkbox"/>		\$355.00
410	- Testing &/or Evaluation (ownership transfer) – Standard	<input type="checkbox"/>		\$505.00
411	- Testing &/or Evaluation (ownership transfer) – Sandfilter	<input type="checkbox"/>		\$505.00
412	- Engineering "Dye Test" Report Review	<input type="checkbox"/>		\$240.00
413	Community Sanitary Sewer Plan Review	<input type="checkbox"/>		\$265.00
500 Public Water Supply:				
501	Community Water Supply: - Inspection (annual)	<input type="checkbox"/>		\$285.00
502	- Plan Review	<input type="checkbox"/>		\$265.00
503	Public Water Supply: - Bacteriological Sampling & Analysis	<input type="checkbox"/>		\$50.00
504	- Operator Certification	<input type="checkbox"/>		\$25.00
505	Non-Community Water Supply: - Inspection, Bacteriological Sampling & Analysis	<input type="checkbox"/>		\$175.00
506	- Plan Review	<input type="checkbox"/>		\$175.00
507	Bottled and Bulk Water Inspection, Bacteriological Sampling & Analysis	<input type="checkbox"/>		\$120.00
508	Cross Connection Control Plan Review	<input type="checkbox"/>		\$175.00
600 General:				
601	Re-Inspection Due to Compliance Issues (all programs)	<input type="checkbox"/>		\$65.00
602	Spill Response	<input type="checkbox"/>		\$150.00
604	Smoking Waiver: Renewal	<input type="checkbox"/>		\$115.00
605	Subsequent Application / Plan Review (all programs)	<input type="checkbox"/>		\$65.00
606	Waiver Application Review & Determination (all programs)	<input type="checkbox"/>		\$145.00
607	Tattooing & Body Piercing: - Biennial Artist Certification	<input type="checkbox"/>		\$140.00
608	- Biennial Establishment Permit & Inspection	<input type="checkbox"/>		\$280.00
609	- Temporary Artist Certification	<input type="checkbox"/>		\$50.00
610	- Temporary Establishment Permit & Inspection	<input type="checkbox"/>		\$100.00
SIGNATURE OF APPLICANT:		DATE:		Total Amount Submitted \$
(A 20 4090 000 41601 01)		FOR OFFICE USE ONLY		ENV ID #
Date Received:				Check / Cash / M.O. Received By:
Amount Received:				Cash / Check / Money Order No:
Credit Card Payment Recorded by:	Amount of Fee Approved by (Env. Staff) \$			by: