Buncombe County Health & Human Services



Public Assistance & Work Support Strategies ~ Public Health ~ Social Work Services ~ Veterans Services

Buncombe County Lodging Establishment Plan Review Application

-Scaled plans must be provided by applicant prior to initiating construction, including additions or renovations.

-An application for a permit or transitional permit for a lodging facility must be submitted at least 30 days before the projected opening of the establishment.

Type of Construction

New_____ Remodel_____ Addition_____

Name of Facility
Physical Address of Facility
Billing Address of Facility
Contact Person
Contact Person Address, Phone Number, Email

Person Directly Responsible for Establishment______ Address, Phone Number, Email______ Owner of Establishment (Corporation, Association, Individual, etc.)______

Name, Title, Address of Owner of Establishment_____

Type of Water: Municipal_____ Well_____ Type of Wastewater: Municipal_____ Septic System_____ Number of Proposed Guest Rooms in Establishment______ Will Establishment provide meals? Yes_____ No_____ If yes, approximate number of meals served_____ (include proposed menu) Briefly Describe the Foods That Are to be Prepared and Served, or Indicate Types of Prepackaged Foods That Will be Offered______

The information provided above is true and accurate to the best of my knowledge:

(Printed Name, Signature, Title, Phone Number)

buncombecounty.org

In accordance with Federal law and U.S. Department of Agriculture (USDA) and U.S. Department of Health & Human Services (HHS) policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. Under the Food Stamp Act and USDA policy, discrimination is prohibited also on the basis of religion or political beliefs.