

**ALBEMARLE REGIONAL HEALTH SERVICES  
ENVIRONMENTAL HEALTH SECTION INFORMATION REQUEST FORM**

**THERE IS NO GUARANTEE A PERMIT WILL BE FOUND BASED ON THE  
INFORMATION YOU HAVE PROVIDED. Requestor's Signature** \_\_\_\_\_

REQUESTORS NAME: \_\_\_\_\_

COMPANY: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

Email address: \_\_\_\_\_

**PLEASE PROVIDE ALL THE INFORMATION BELOW FOR THE REQUESTED  
PROPERTY**

COUNTY \_\_\_\_\_

PHYSICAL ADDRESS OF PROPERTY \_\_\_\_\_

LOT # \_\_\_\_\_ BLOCK # \_\_\_\_\_ PHASE \_\_\_\_\_ SECTION \_\_\_\_\_

SUBDIVISION \_\_\_\_\_

PARCEL IDENTIFICATION NUMBER \_\_\_\_\_

CURRENT OWNER \_\_\_\_\_

PREVIOUS OWNER(S) \_\_\_\_\_

INFORMATION REQUESTED: \_\_\_\_\_ COPY OF SITE EVALUATION

\_\_\_\_\_ COPY OF PERMIT \_\_\_\_\_ COPY OF SITE PLAN/SURVEY

\_\_\_\_\_ SLEEPING CAPACITY & NUMBER OF BEDROOMS APPROVED

**ONCE THIS FORM IS COMPLETED PLEASE FAX TO THE APPROPRIATE COUNTY  
OFFICE . Fax Numbers for County Offices are below.**

Bertie 252-794-5361 Camden 252-338-4475 Chowan 252-482-6020  
Currituck 252-232-6605 Gates 252-357-2251 Pasquotank 252-337-7921  
Perquimans 252-426-2104

*Deerford Co 252-862-4263*