

## Application for License to Operate a Lodging Establishment or Children's Camp

#### **INSTRUCTIONS**

- Submit the application and fees at least 30 days before you plan to open.
- Fill out the application clearly and completely. It must be signed. Incomplete applications will be returned and will delay the licensing process.
- Make your check or money order payable to the Vermont Department of Health. Fees are non-refundable.
- Submit a plan review for all new construction and major renovations. Refer to the PlanReview Checklist for requirements. There is no fee for a plan review.
- Submit a copy of the water/wastewater permit for the building, or documentation from an engineer in lieu of a wastewater permit. Contact a <u>regional office</u> if you don't have a permit for your project.

# DON'T FORGET TO INCLUDE:

- ✓ Application
- ✓ Fees
- √ Wastewater documentation

#### YOU MAY ALSO NEED:

- ✓ Water test results
- ✓ Plan review

 Submit a printed application. Mail the complete application packet to Vermont Department of Health, Food & Lodging Program.

 USPS
 UPS or FedEx

 PO Box 70
 108 Cherry St.

 Burlington, VT 05402-0070
 Burlington, VT 05401

You can also apply online at healthvermont.gov/food-lodging.

#### **NEXT STEPS**

- After the application is processed, a public health inspector will contact you to discuss your business details and to schedule a preliminary or opening inspection.
- A license is issued after passing an opening inspection and is valid for one year from the date of inspection. The license will be emailed within ten business days after inspection.
- License application materials are public records as mandated by Vermont law and may be made available to the public, unless otherwise prohibited by State or Federal law.
- For questions, call the Food & Lodging Program at 802-863-7221.

# I. Facility Information

#### **Business Status**

Plan Review

License Issuance Approval

New – New construction/change in use. A Plan Review is required for new construction. Change of Ownership – The space has been licensed as a lodging facility in the past but will operate under a new legal entity

Date of Legal Ownership Change:

Renewal - Renewal of an ex	kisting license.	
Planned Opening Date:		
Facility Name (dba) Provide the name a	s it will be known to the public.	
Name:		
Location Information Provide the physical Street Address:	al location of the business.	
City:	State:	Zip:
Facility Contact Information Contact information and postal address.	formation for the facility. Renewal	notices will be sent to this
Mailing Address:		
City:	State:	Zip:
Phone:	Email:	
Inspection Contact Contact for question	ons about this application and sch	eduling the inspection.
Name:	Title:	
Phone:	Email:	
Emergency Contact Provide an emerge	ency contact in the event of fire, flo	ood, disease outbreak.
Name:	Title:	
Phone:	Email:	
License ID#		
Date Received		
License Fee Amount Received		
Check or Money Order Number		
Public Health Inspector Assigned		

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APP

Date

N/A

SUB

**REQ** 

Initials

II. Owner Informat	tion			
Business Registration What type of	of entity owns this business?	Please check ONE.		
Corporation (Inc.) Sole Proprietorship	Limited Partnership LLC	Governmental Entity Partnership	Nonprofit School	
Legal Owner Provide the exact legal name of the ownership entity as it is registered.				
Owner Address:				
City:	Sta	te: Zi	ip:	
Phone:	Ema	ail:		
III. Operations Info	rmation			
icense Categories				
Lodging Capacity 1-10	\$130			
Lodging Capacity 11-20	\$185			
Lodging Capacity 21-50	\$250			
Lodging Capacity 51-200	\$390			
Lodging Capacity 201+	\$1000			

Food Service Does the facility serve food other than prepackaged items, whole fruit, and coffee?

\$150

Yes No

Children's Camp

If yes, you must also submit an Application for License to Operate a Food Service Establishment. This does not apply to Children's Camps.

Pool and Hot Tub Does the facility have a pool, hot tub, and/or recreational water facility?

Yes No

Operating Times:		
Hours of operation:		
Days of operation:		
If seasonal, months of operation:		
Previously Licensed Provide the name of the previously licensed business at this address.		
Name:		
Not Applicable/Not Known		
Language Preferences		
What languages do you speak?		
Do you need an interpreter?		
IV. Physical Location Information		
Water Supply Does the establishment receive all or a portion of its water from an onsite well?		
Yes – Include copy of recent coliform/E.coli water test results.		
No – List name of municipal water system:		
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### V. Compliance Certification

Applicant's Statement Regarding Child Support and Vermont Taxes

Under Vermont law, you are required to certify that you are in "good standing" on child support payments before you can receive a professional license or other business or trade certification. (You can read the law by searching the internet for 15 V.S.A. § 795.)

Your signature on this application indicates you are in "good standing" on child support because one of these applies:

- You are not required to pay child support.
- You owe less than one month or support.
- You are currently disputing the child support you owe in court.
- You owe child support but are complying with a payment plan.
- This does not apply because it is a business seeking certification.

Under Vermont law, you are required to certify that you are in "good standing" on taxes owed to the State of Vermont before you can receive a professional license or other business or trade certification. (You can read the law by searching the internet for 32 V.S.A. § 3113.)

You signature on this application indicates you are in "good standing" with Vermont taxes because one of these applies:

- You have filed all your tax returns and do not owe any taxes.
- You are currently appealing the amount of taxes you owe.
- You owe taxes but are complying with a payment plan with the Commissioner of Taxes.

If you are not in good standing, you can ask the licensing authority to consider whether requiring you to become current on child support or Vermont taxes before issuing a license would be an unreasonable hardship.

I hereby certify that I am in good standing with regard to child support and Vermont taxes. I further certify that all information stated in this application is true and accurate to the best of my knowledge. I understand that providing false information or leaving out information is against the law and may cause me to lose my license/certification/registration.

Printed Name:	Date:
Signature:	Title:
Tax ID Number OR Social Security Number:	