



**Uintah County**  
133 S. 500 E.  
Vernal, UT 84078  
P: (435) 247-1160  
F: (866) 249-5255

**Duchesne County**  
409 S. 200 E.  
Roosevelt, UT 84066  
P: (435) 722-6310  
F: (866) 269-6335

### **HOTEL/MOTEL REQUEST FOR PLAN REVIEW**

Application Date: \_\_\_\_\_

Parcel #: \_\_\_\_\_

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_  
Street Address City State Zip

Mail Address: \_\_\_\_\_  
Street Address City State Zip

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City State Zip

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

### **FOLLOWING ITEMS MUST BE ADDRESSED ON PLANS:** (see Rules R392-502)

Water Supply  
Wastewater Disposal  
Plumbing  
Operation and maintenance  
Swimming pool and spa\*  
Food Service/Kitchen\*  
Solid Waste  
Designate pet friendly rooms if applicable

\*ADDITIONAL APPLICATIONS AND FEES MAY BE REQUIRED BASED ON SERVICES PROVIDE BY YOUR FACILITY.  
(Swimming pools and food service will be reviewed independently)

**THE FACILITY MUST HAVE A PRE OPENING INSPECTION PERFORMED BY TRICOUNTY HEALTH PRIOR TO USE.**  
**PLAN REVIEW FEE \$200.00**

#### **HEALTH DEPARTMENT USE ONLY**

Received by: \_\_\_\_\_ Date Received: \_\_\_\_\_

Amount: \_\_\_\_\_ Receipt #: \_\_\_\_\_

