

Municipality of Anchorage ANCHORAGE HEALTH DEPARTMENT

ENVIRONMENTAL SERVICES / FOOD SAFETY & SANITATION



825 L Street, P.O. Box 196650, Anchorage, Alaska 99519-6650 Telephone: (907) 343-4200 Fax: (907) 343-4786 www.muni.org/EHonline

APPLICATION FOR PLAN REVIEW

Remodel/Upgrade	enew	Construction	Existing Building	New Const	ruction/New Building	
Establishment Name:						
Site Address:			Mailing Address:			
Owner Name:		Address:		Phone:	Fax:	
Email:						
Contact Name:		Address:		Phone:	Fax:	
Email:						
Square feet:			If Food, Menu Provided:			
equare rees.			YesNo			
Applicants Signature:			Application Date:			
Department Notes / C	omments					
		OFFIC	E USE ONLY			
Amount Received:	Payment Typ		Receipt Number:	Date Re	Date Received:	
Fees:	1			l		
Spa	\$ 300.00		—— Facility ID:			
Pool		(Date Paid)	r acility ID			
0-1600 sq. ft.:	\$ 500.00	(Data Daid)				
1600 sq. ft. +:	\$ 750.00	(Date Paid)	DI D : D	roject Number:		
Food		(Date Paid)				
0-1000 sq. ft.:	\$ 220.00	/D.: D.:				
1001-4000 sq. ft.:	\$ 330.00	(Date Paid)				
4001 sq. ft. +:	\$ 550.00	(Date Paid)				
72-038 Ver. 10_19*	DISTRIBUTION: Wh	nite - FS&S	Canary - FS&S Accounting	Pink - Customer		