

Phone: (806)-378-9472  
TDD: (806)-378-4229  
Fax: (806)-378-3585  
ehealth@amarillo.gov



Receipt # \_\_\_\_\_

Date Paid \_\_\_\_\_

Permit # \_\_\_\_\_

## Amarillo Area Public Health District

### Application for a Voluntary Construction Compliance Inspection

Inspection Fee: \$95

Name of Establishment: \_\_\_\_\_

Address of Establishment: \_\_\_\_\_

Name of person/business requesting inspection: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Contact number: \_\_\_\_\_

Applicant's signature \_\_\_\_\_ Hours of operation \_\_\_\_\_

**Mail Application and Permit Fee To:**  
Environmental Health Department  
PO Box 1971  
Amarillo, TX 79105-1971

**Physical Address**  
Environmental Health Department  
808 S. Buchanan  
Amarillo, TX 79101