

NOTIFICATION FOR INSPECTION OF AGRICULTURAL WORKER HOUSING

Please complete and submit this form by email to: cdcfax1@hpeph.ca or fax: 613-966-1813

Application must be submitted at least 14 days prior to requested inspection date.

FACILITY/FARM Name:	
	unicipality:
OWNER Namo:	
	Ounar Email:
Owner releptione.	Owner Email:
CONTACT (if different from Owner info)	
Contact Name:	
Contact Telephone:	Contact Email:
	nonths of operation:
Drinking Water Supply: Municipal Priva	
	led well □ Dug well □ Cistern □
	e of Most Recent Water Sample
	nple result:
	nking Water Treatment: Yes No
Sewage Disposal: Municipal \Box Private \Box	
Proposed Date of Worker Arrival:	Number of Workers:
Requested Date of Inspection:	(14 days' notice required)
 Inspections will no longer be conducted 	on a winterized unit. Please plan accordingly.
 Kingston Public Health Laboratory does r 	not receive water samples on Fridays; therefore, inspections must
be booked Monday through Thursday.	
\square By submitting this application, the owne	r/operator agrees to be present for the duration of the scheduled
inspection. Inspections may be canceled	if the owner/operator is not present.
☐ I agree to secure all animals & pets for the	ne duration of time the inspector is on site (if applicable).
	the Infectious & Communicable Diseases Program at 500 or 1-800-267-2803 ext. 349.