



Public Health
Prevent. Promote. Protect.

MARSHALL COUNTY HEALTH DEPARTMENT

1800

513 6th Street, Moundsville, WV 26041

304-845-7840

FEES FOR SERVICE INVOICE

DATE: _____ **NAME/BUSINESS:** _____

ADDRESS: _____

RE-INSPECTIONS/FEE	\$100.00	Search & Copy 0-15 minutes	\$10.00
Bed & Breakfast	Body Piercing Studio	Search & Copy 16-30 minutes	\$20.00
Campground	Daycare	Search & Copy 31-45 minutes	\$30.00
Food Service	Hotel/Motel	Search & Copy 46-60 minutes	\$40.00
Mobile Home	Septic System	Search & Copy	\$.50 per page
Swimming Pool	Tattoo Studio		
Well			

FOOD HANDLERS/PIC/CFM			
Food Handlers Cards - County			\$20.00
Food Handlers Cards - State			\$25.00
Food Handlers Duplicate			\$10.00
Person-In-Charge Card			\$75.00
Person-In-Charge/CFM/ServSafe Filing Fee			\$10.00
Off-Site Food Handlers/Person in Charge Class			\$100.00

ENVIRONMENTAL			
Environmental Permit Duplicate			\$10.00
Home Loan Evaluation (septic/septic & well)			\$250.00
Home Loan Evaluation - well only			\$136.00
Home Loan Evaluation - additional visit			\$75.00
Homeowner Installer's Test			\$75.00
Plan Review - Subdivision 1-29 lots			\$10.00 per lot
Plan Review - Subdivision 30+ lots			\$300.00
Plan Review - Change of Ownership			\$150.00
Plan Review - Food Service 0-20 seats			\$150.00
Plan Review - Food Service 21-50 seats			\$250.00
Plan Review - Food Service 51-79 seats			\$350.00
Plan Review - Food Service 80+ seats			\$400.00
Plan Review - Retail			\$250.00
Plan Review - Tanning 1-5 devices			\$100.00
Plan Review - Tanning 6-10 devices			\$150.00
Plan Review - Tanning 11+ devices			\$200.00
Plan Review - Mobile Food			\$150.00
Plan Review - Campgrounds 1-10 sites			\$200.00
Plan Review - Campgrounds 11+ sites			\$10.00 per site
Plan Review - Tattoo Studio 1-5 workstations			\$100.00
Plan Review - Tattoo Studio 6-10 workstations			\$150.00
Plan Review - Tattoo Studio 11+ workstations			\$200.00
Plan Review - Body Piercing Studio			\$150.00

By signing below, I acknowledge my understanding of a fee associated with the service and payment.

Signature of Responsible Party

Signature of Health Dept. Staff

Date

CHECKS OR MONEY ORDERS PAYABLE TO: MARSHALL COUNTY HEALTH DEPARTMENT

White ... Environmental

Yellow ... Financial

Pink ... Applicant

*** RETURN ALL THREE COPIES TO THE HEALTH DEPARTMENT ***

(Revised 3/2024)