



HOKE COUNTY
Department of Public Health

683 East Palmer Road
Raeford, North Carolina 28376



Helene Edwards , MS,RD,LDN
Health Director

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Application for Lodging Establishment Permit

Name of Establishment: _____

Address of Establishment: _____

Type of Establishment: Hotel/Motel Bed & Breakfast Other

Owner/Lessee's Name(s): _____

Owner/Lessee's Address: _____

Owner/Lessee's Phone: _____ Email: _____

Construction: New Existing (Renovation/Addition) Existing (owner/lease transfer only)

Note: Plans, drawn to scale, must be submitted for new construction and renovations.

Water supply: County Well Wastewater: Public Sewer Septic System

Number of rooms: _____ Total guest capacity: _____

Do you plan to offer breakfast or other food service? Yes No

If yes, submit a menu of ALL food/drink items that will be offered. Menu attached N/A

Do you plan to have a swimming pool, wading pool or spa? Yes No

If yes, a pool permit will be required. Please submit a pool permit application and plans to Hoke Co Env. Health.

Applicant Information (If different from owner/lessee):

Name: _____ Phone: _____ Email: _____

I am the lawful owner/lessee of the proposed lodging establishment or their authorized representative. I attest to the accuracy of this information and I understand that if any information submitted on or with this application is found to be falsified or incorrect that permits issued based on such information may be revoked or otherwise deemed invalid.

Applicant Signature: _____

Date: _____