TANEY COUNTY HEALTH DEPARTMENT

CHANGE IN LODGING LICENSE REQUEST



320 Rinehart Rd., Branson, MO 65616

PHONE: 417-334-4544 EXT. 593

FAX: 417-336-9604

APPLICATION MUST BE COMPLETED IN ITS ENTIRETY AND EMAILED TO EHS@TANEYCOHEALTH.ORG								
Name of esta	ablishment as stated on license:	Date:						
Address of e	stablishment as stated on license:							
Request for a	addition/removal:							
Reason for re	equest:							
requests a pe	nsee as stated on the license:ermanent er of licensed rooms from total							
This change is being requested to reflect the addition/removal of the following room(s) from service:								
Room #	Building Name/Number	Room #	Building Name/Number					

I understand that:

- Rooms removed from my lodging license may not be occupied for any length of stay by paid or unpaid guests, including employees or workers. If I wish to return rooms to service, I must submit this form requesting its return to my lodging license.
- All rooms added to my lodging license must pass all necessary inspections and may incur additional fees.
- I should contact the Taney County Health Department and my city or county government when changes to my license (including ownership changes), renovations, or the addition or removal of rooms are being planned to avoid interruptions to my lodging operations and because additional items such as permits, inspections, documents, etc. may be required. Only my city or county government can tell me what their requirements are so I must contact them for those details.

	on at 417-334-4	_	ge Will Impact	my lodging fac	ility by calli	ing ICHD'S Envii	ronmentai Heaith	
Name of lice	ensee as stated	on the license (please print):					
Sign using A	crobat Reader b	y clicking on 'Fill	& Sign' on the	e right then clic	k the signa	ture icon at the	top of the page.	
Signature of	flicensee as sta	ited on the licen	se:					
Licensee Phone Number:				Licensee Email:				
		Official Use	Only. Do No	t Write Below	This Line.			
Date Received:		Date Reviewed:		Reviewed By:				
Updated:	Accounting	Software	City/County	/ State	Filed	Records		
Status:								
Comments:								