

ORDINANCE 17-2

An Ordinance establishing a fee schedule for Grant County Health District.

BE IT ORDAINED BY THE BOARD OF HEALTH OF THE GRANT COUNTY HEALTH DISTRICT, the following fee schedule is adopted and established for the Grant County Health District.

2018 Fee

CLASS A. ADMINISTRATIVE SERVICES

A-1	Bad Check Charge		\$ 36.00
A-2	Administrative Hearing	Billed at actual cost	
A-3	Lamination (per sheet)		\$ 2.00
A-4	Copy Fee (No charge for record research)		\$ 0.15
A-5	Staff time for extensive copying		\$ 20.00
A-6	(Records) Extensive postage, delivery & other fees (Fees do not apply to health information released for public health purposes)		

CLASS E. ENVIRONMENTAL HEALTH SERVICES

****WHEN A BUSINESS IS CHANGING CLASSIFICATIONS WITHIN THE SAME YEAR, CHARGE THE DIFFERENCE BETWEEN THE 2 CLASSIFICATIONS**

E-50	Hourly Sanitarian Rate (Hourly Rate)		\$ 77.00
------	--------------------------------------	--	-----------------

FOOD PROTECTION PROGRAM -

E-100	Food Worker's Permit, including food education		State Fee
E-101	Food Worker's Permit (Duplicate)	Half of State Fee	
E-102	Temporary food service permit exemption		\$ 11.00
E-103	Food Worker's Permit Group-(20 people minimum)		State Fee
E-104	Food Service Permit		
	Complex		\$ 478.00
	Simple		\$ 324.00
	Limited		\$ 62.00
E-105	Food Service Permit with Lounge - Addl.		\$ 93.00
E-106	Catering Permit		\$ 144.00
E-107	Mobile Food Permit (Non-Potentially Hazardous Food)		\$ 93.00
E-108	Mobile Food Permit (Potentially Hazardous Food)		\$ 427.00
	(Pre-packaged Potentially Hazardous Food)		\$ 144.00
	Push Cart		\$ 155.00

E-109	Pre-opening Inspection for new establishment	1/2 the annual fee	
E-110	Temporary Food Permit-Commercial Food Vendor (Up to 4 consecutive days)		
	High Risk Foods		\$ 77.00
	Moderate Risk		\$ 52.00
	Low Risk		\$ 26.00
	1 Week		
	High Risk Foods		\$ 103.00
	Moderate Risk		\$ 72.00
	Low Risk		\$ 42.00
E-111	Temporary Food Permits not applied as required in current Food Ordinance	Double Fee	
E-112	Temporary Food Permit-Non Profit Organization, and Licensed Caterer providing Temporary Food (Up to 4 consecutive days)		
	High Risk Food		\$ 39.00
	Moderate Risk		\$ 26.00
	Low Risk		\$ 13.00
E-113	Temporary Food Permit for Non-Profit Organization/Licensed Caterer 7 Days	1/2 Fee of Commercial	
E-114	Annual Commercial Organization Temporary Food Permit		
	High Risk Foods		\$ 205.00
	Moderate Risk Foods		\$ 144.00
	Low Risk Foods		\$ 83.00
E-115	Annual Non-Profit Organization Temporary Food Permit		
	High Risk Foods		\$ 103.00
	Moderate Risk Foods		\$ 72.00
	Low Risk Foods		\$ 42.00
E-116	Bed and Breakfast Permit		\$ 200.00
E-117	Grocery with pre-packaged potentially hazardous cold holding		\$ 190.00
E-118	Grocery with Food Service - Additional		\$ 200.00
E-119	Grocery with Bakery, Meat Cutting, Produce - Each Addtl.		\$ 109.00
E-120	Grocery with Limited Food Service, Bulk Food - Each Addl.		\$ 47.00
E-121	Vending Machines - Potentially Hazardous Foods		\$ 47.00
E-122	Food Service (Large, 3000 + Capacity) Contract with negotiated Rates 4 or more concessions (First 4 hrs.-addtl. @ hourly rate)		
E-123	Meat or Fish Market		\$ 150.00

E-124	Bakery	
	a. Bakery Only	\$ 150.00
	b. Itinerant/Commercial Bake Sales (per year)	\$ 57.00
E-125	Roadside Fruit and Vegetable Stand with Limited Food Service	\$ 93.00
E-126	Winery/Tavern with Limited Food Service (fully cooked pre-packaged food)	\$ 155.00
E-127	Espresso Stand - No Food Service or Limited Food Service	\$ 155.00
E-128	Food Demonstration Permit	\$66.00/year
E-129	Senior Center	\$ 67.00
E-130	Replacement Plaque for food permit	\$ 11.00
E-131	Thermometers/Handwashing spigots	Cost + 10%
E-132	Architectural and Mobile Plan Review Fee	1/2 the annual fee; Hrly San.
	Field Plan Review	1/4 annual fee
	Menu Review	1/4 annual fee
	Structure/equipment review	1/4 annual fee
E-133	Copy of Washington State Food Code (2nd copy and thereafter)	\$ 3.00
E-134	Commissary Permit	
	Storage and dish washing	\$ 103.00
	Food preparation	\$ 205.00
E-135	Seasonal Temporary Food Permit-Commercial Food Vendor	
	High Risk Foods	\$ 308.00
	Moderate Risk Foods	\$ 205.00
	Low Risk Foods	\$ 103.00
E-136	Seasonal Temporary Food Permit-Non Profit Organization	
	High Risk Foods	\$ 155.00
	Moderate Risk Foods	\$ 103.00
	Low Risk Foods	\$ 52.00

ON-SITE SEWAGE PROGRAM

E-200	On-Site Sewage Permit (valid for one year)	\$ 822.00
	On-Site Sewage Permit > 1000 gpd (up to 2 finals)	\$ 976.00
	(Soil and site information needs to be included in every design)	
	Each Additional final inspection	\$ 119.00
E-201	Site Visit to evaluate Soil due to lack of information or misinformation with a septic design	\$ 77.00
E-202	Site Registration (required for plats and some alterations)	\$ 400.00
	Can be used for other "suitability for septic" requests	
E-203	Alteration Permit (Site Registration will be required if proposal includes changes to the drainfield and file	\$ 422.00

information does not show testholes in the proposed drainfield area)

E-204	Repair Permit (Single Family Residence)	\$	205.00
	Non-Single Family Residence	\$	385.00
E-205	On-site Sewage Permit Renewal or Design Revision	\$	150.00
E-206	Existing System Evaluation (ESE)	\$	257.00
E-207	Variance/Waiver/Exemption	\$	150.00
E-208	Septic Tank Installer or Pumper Certificate (Installer Exam Required Except when Certified in another County within Washington State)	\$	242.00
E-209	Septic Tank Installer or Pumper Certificate Renewal	\$	129.00
	Each additional vehicle	\$	82.00
E-210	Installer Exam	\$	93.00
E-211	Privy Permit	\$	232.00
E-212	Septic System Maintenance Certificate (exam required)	\$	67.00
E-213	Copy of WAC 246-272A - Sewage Regulations	\$	6.00
E-214	Installer Application Study Packet		
	Compact Disk	\$	6.00
	Paper Packet	\$	21.00

LAND USE/PLANNING

E-250	Short Plat	\$	411.00
E-251	Long Plat, Binding Site Plan	\$	616.00
E-252	Plat Alteration	\$	308.00
E-253	Conditional or Discretionary Use Permit	\$	205.00
E-254	Reasonable Use Exception	\$	77.00
E-255	Site Plan Review	\$	77.00
E-256	Review of Planning Variance	\$	155.00
E-257	Boundary Line Adjustment	\$	155.00
E-258	SEPA (GCHD as the lead agency)	\$	616.00
E-259	"METHOD 2" REVIEW	\$	1,027.00

WATER PROGRAM

E-300	Water Availability Review, Service Area Review or SMA Review (Political Subdivisions included)	\$	103.00
E-301	Water System Evaluation (Including VA/FHA Loan Certification)	\$	160.00
	Additional bacteriological water samples \$51.00 each	\$	52.00

Plus chosen lab fees

E-302	Certification-Both Water and On-site Sewage Disposal System (Including VA/FHA) (Bacteriological samples)	\$ 190.00 (\$213.00 w/Nitrate Sample) Plus chosen lab fees
E-303	Water Samples (Bacteriological Sample)	\$ 82.00 (\$107.00 w/Nitrate Sample) Plus chosen lab fees
E-304	Group B Water System Application Review	\$ 642.00
	Fee if application is prepared by a Licensed Water System Engineer (PE)	\$ 514.00
	Group B Annual Operating permit	\$ 77.00
E-305	Well site Inspection	\$ 170.00
E-306	Group B Water System Application	
	Compact Disk	\$ 6.00
	Paper Packet	\$ 21.00
	Email	No charge
E-307	Assess	Hourly Rate

SOLID WASTE PROGRAM

E-400	Annual Permit Fee for Large Composting Facility (>25000 yds ³ /year)(30hr. minimum)	\$ 2,319.00
E-401	Annual Permit for MSW Landfill (25 hr. minimum)	\$ 1,932.00
E-402	Annual Permit Fee for Small Composting Facility (≤25000 yds ³ /year)(10hr. minimum)	\$ 773.00
E-403	Annual Permit for Other Landfill (i.e.- Inert Waste, Limited purpose, Closed)	\$ 773.00
E-404	Annual Permit for Transfer Station (10 hr. minimum)	\$ 773.00
E-405	Annual Permit for MRW Facility (not at another permitted facility) (10 hr. minimum)	\$ 773.00
E-406	Annual Permit for Anaerobic Digester (10 hr. minimum)	\$ 773.00
E-407	Annual Permit for Energy Recovery and incineration (10 hr. minimum)	\$ 773.00
E-408	Annual Permit for Land Application (10 hr. minimum)	\$ 773.00
E-409	Annual Permit for Pile Storage (10 hr. minimum)	\$ 773.00
E-410	Annual Permit for Other Intermediate Solid Waste Handling Facilities (10 hr. minimum)	\$ 773.00
E-411	Annual Permit for Recycling (10 hr. minimum)	\$ 773.00
E-412	Annual Permit for Waste Tire Storage (10 hr. minimum)	\$ 773.00
E-413	Annual Permit for Dropbox Site (2hr. minimum)	\$ 155.00
E-414	Solid waste permit application review fee (10hr. minimum) includes:	\$ 773.00

Pre-permit site evaluation
 Application review and comment
 Initial Operations plan review
 Design review

E-415	Review of other facility plans (i.e.- Post Closure, Facility expansion) (4 hr. minimum)	\$ 309.00
E-416	Review of Operations Plan Revision/Amendment (4 hr. minimum)	\$ 309.00
E-417	Feedstock Proposal Review (1hr. minimum)	\$ 77.00
E-418	SEPA process and fees for Land Application sites when GCHD is lead	See <u>Land</u>
E-419	Services in excess of allotted minimum time	Hourly rate

WATER RECREATION PROGRAM

E-450	Permit for Pool or Spa: Seasonal Permit	\$ 355.00
	Annual Permit	\$ 432.00
E-451	Cost for each additional Pool or Spa (Same Enclosure)	\$ 82.00
	Multiple Pool Enclosures at same location, Same ownership	15% Reduction
E-452	Pre-opening	Half Normal

SCHOOL PROGRAM

E-500	School Kitchen	\$ 324.00
E-501	Satellite Kitchen	\$ 165.00
E-502	Architectural Plan Review Fee Schools (four hours)	\$ 340.00
	Hourly Rate beyond 4 hours	
E-503	Job Corps	Hourly Rate

LIVING ENVIRONMENT

E-550	Mobile Home Park Plan Review	Hourly Rate
-------	------------------------------	-------------

MISCELLANEOUS

E-600	Late Fee, installation or operating without a valid permit (Food, Sewage, Pools, etc.),	Double Norm
E-601	Reinspection (Food, Pools, Sewage, etc.)	Half Normal Permit Fee
E-602	Variance/waiver (pools, food, sewage, etc.)	\$ 150.00
E-603	I-901 25 foot rebuttal application	\$ 324.00
E-604	Administrative Hearing	Based on Current Cost
E-605	I-901 3rd documentation of violation (per day)	\$ 129.00

CLASS P. PERSONAL HEALTH SERVICES

Sliding fee, based on number of household residents and income, applies as indicated.

Fees may be negotiated for services provided in response to a case or outbreak, as determined by public health impact.

IMMUNIZATIONS

Sliding fee applies to routine State-provided children's immunizations

Sliding fee applies to public health prophylaxis IF no third party payer

Immunization Visits include:

- 1. Office visit fee (one per visit)
- 2. Immunization costs including vaccines, materials, administration fee

VACCINE/MATERIAL COSTS

See periodically updated fee list for cost of vaccine.

Special Clinic fees will be by specific arrangement and written agreement.

OFFICE VISITS

All visits require an office visit fee unless otherwise noted

P-100	Routine Immunization Office Visit (10 min.)	\$	25.00
P-101	Detailed Nursing Visit (30 min.)	\$	51.00
P-102	Immigration visit (No Slide - Requires added cost of Immunizations and materials)	\$	25.00
P-103	Traveler's Advice (per trip) (No Slide - Requires added cost of Immunizations)		
	First Visit (Must be paid before seeing nurse) Travelers must make initial traveler's advice appointment 2 weeks prior to travel	\$	61.00
	Expedited fee for service with less than 2 weeks before travel (Service will be provided after 3 working days)	\$	25.00
	Second and Subsequent Visits or	\$	25.00

VACCINE ADMINISTRATION

P-200	Any vaccine, per dose	\$	15.00
-------	-----------------------	----	-------

ROUTINE ADULT IMMUNIZATIONS

Office visit fee NOT required

P-300	Influenza	Based on Current Cost
P-301	Pneumococcal vaccine	Based on Current Cost

TB SERVICES

Sliding fee applies to P-400 - P406

P-400	Initial TB Consultation	\$	61.00
P-401	TB Clinic Visit	\$	31.00
P-402	Tuberculin Skin Testing (Requires Added TB Clinic Visit) Only high risk clients are tested at the Health District, unless special arrangements are made, which may exclude use of sliding fee).	\$	15.00
P-403	TB Nurse Home Visit - Plus cost of medication	\$	76.00
P-404	Non-Professional TB Visit (Home)	\$	61.00
P-405	Chest X-Ray (A/P only)	Based on Current Cost	
P-406	Chest X-Ray 2-view (A/P and Lateral)	Based on Cu	
P-407	Administrative Immigration Documentation (I-693)	\$	61.00

TB contact investigation services are provided at no cost to contacts of active TB cases, if no third party payer.

HIV/AIDS SERVICES

Fees for special or other general education activities may be negotiated by written agreement, with consideration given to public health impact.

HIV TESTING

Fee includes staff time for counseling and obtaining, processing specimen plus materials.

P-550	HIV Counseling and Testing (No Sliding fee)	\$	117.00
-------	---	----	--------

Fees do not apply to testing done in conjunction with high-risk HIV prevention interventions.

OTHER SERVICES

P-600	Hourly Nursing Fee- (unless service otherwise noted) May be negotiated by written agreement, with consideration given to public health impact.	\$	76.00
P-601	Hourly Health Educator Fee- (unless service otherwise noted) May be negotiated by written agreement, with consideration given to public health impact.	\$	61.00
P-602	Blood draw-only (does not include P-19) (Outside lab fees are to be paid by the client)	\$	41.00
	(includes DNA)		

CLASS V. VITAL RECORDS

V-100	Certified Copies (Birth & Death)	State Fee
V-101	Expedited Service for Certified Copies (Birth)	Additional \$10
V-102	Re-issuance of Death Certificates	State Fee
V-103	Duplication of Death Certificates due to submittor's errors (If original is returned)	\$10/each

V-104 Mailing of Birth Certificate

\$2/copy

V-105 Records Search (Birth & Death)

State Fee

State Fee

Section 5. POSTING

The District Health Officer shall cause to be posted in a conspicuous location in the office of the Grant County Health District a complete schedule of all Health District fees and charges. A Public Hearing announcing proposed new fees or increased fees will be published in the newspaper of general circulation in the county. All charges shall take effect on date of their posting, and such posting shall constitute public notice.

Section 6. FEE COLLECTION

The District Health Officer or his designee shall collect all fees and same shall be remitted to the County Treasurer to be credited to the Health fund.

Section 7. DELINQUENT ACCOUNTS

Accounts that are delinquent for more than 90 days will be sent to a collection agency.

Section 8. OUTSTANDING DEBTS

No new permit will be issued to persons or businesses having an outstanding debt to the Health District. This will not apply to food program re-inspection fees for which payment is due within 45 days after the date of invoice.

Section 9. PRORATING OF FEES

Permits of the following classes may be prorated: **E-104** through E-109, E-116 through E-121, E-123 through E-127, E-129 and E-134.

A prorated fee schedule shall be for a period of January 1 to March 31 or October 1 to December 31 and shall be equal to 1/2 the usual fee plus \$30.

Section 10. REFUND OF FEES

If no service has been given, the full amount of the fee less \$30.00 may be refunded.

Section 11. HEALTH OFFICER'S AUTHORITY

"The Health Officer is authorized to establish, in the interim, a fee for a new service not to exceed the cost of providing the service and such fee will be formally adopted at the time of the next ordinance amendment".

Section 12. FEE CHANGES

"When a service includes a product, changes in fee may be made to reflect product cost increases, plus administration fee".

Section 13. EFFECTIVE DATE

This Ordinance shall take effect on **January 1, 2018** after its passage, approval and execution.

PASSED BY THE GRANT COUNTY BOARD OF HEALTH AND SIGNED BY ITS CHAIR

ON November 8, 2017

ATTEST:

Tony Massa, Chair of the Board

Virginia Valdez, Administrative Services Manager
Clerk of the Board

APPROVED AS TO FORM:

Katherine Kenison
Health District Attorney