



# 2024 Seasonal Housing Inspection Request Form

For questions regarding your inspection request, please contact the Environmental Health Team Program Assistant at 519-426-6170 Ext. 3477 or at [ehthotline@hnhss.ca](mailto:ehthotline@hnhss.ca)

Effective January 1, 2024, a new fee structure will be implemented. A required inspection will be \$95 per seasonal housing unit. If a re-inspection or secondary water sample is required, a \$45 fee will be charged. Payment can be made at a Health Unit office, or mailed to: Haldimand-Norfolk Health Unit, 12 Gilbertson Drive, PO Box 570, Simcoe ON N3Y 4N5. Please make cheques payable to **Norfolk County**.

Farm Operator applying for workers:

Farm Owner Name:

Business Name:

Contact Numbers: (please check the preferred contact number):  
 Cell:   
 Business:   
 Home:

Email:

Mailing Address:

Postal Code:

To avoid delay with your bunkhouse approval, please ensure the following steps are taken prior to inspection:

- Provide at least 2 weeks notice when requesting an inspection. A PHI may be able to accommodate this sooner, but last minute requests cannot be guaranteed.
- Inspections should be requested and occurring **prior** to workers arrivals, but not more than 2 months **after** arrivals.
- **The water supply is on.** It is advised to sample the water and obtain a bacteriologically safe result prior to the inspection.
- Inspections will no longer be conducted on a winterized unit. Please plan accordingly.
- **The bunkhouse has been thoroughly cleaned.** If workers are present, the **onus is on the farm owner/operator** to ensure the bunkhouse will pass an inspection. Therefore, it is advised a check of the bunkhouse is done prior to the inspection.
- Building Department and/or Fire Department have been consulted and applicable permits issued for all new bunkhouses, renovated bunkhouses, and/or proposed usage of any other building that may house seasonal agricultural workers. **Failure to meet the Ontario Building Code and Fire Code can result in non-approval, and/or legal action.**

**PLEASE COMPLETE REVERSE TO INDICATE HOUSING UNITS TO BE INSPECTED →**

# Please indicate location(s) of seasonal housing accommodation(s)

Housing Location (Street Address and Township)	Approx. Worker Arrival Date (please print in full)	Number of Housing Units Requiring Inspection / Re-Inspection	Please choose what applies to the housing unit	
<i>Example: 123 Charlotteville Rd 10, Charlotteville</i>	<i>Jan. 1, 2024</i>	2	<input checked="" type="checkbox"/> New Bunkhouse <input type="checkbox"/> Newly Renovated Bunkhouse	<input checked="" type="checkbox"/> Routine Inspection <input type="checkbox"/> Re-inspection/ Water Re-sample
			<input type="checkbox"/> New Bunkhouse <input type="checkbox"/> Newly Renovated Bunkhouse	<input type="checkbox"/> Routine Inspection <input type="checkbox"/> Re-inspection/ Water Re-sample
			<input type="checkbox"/> New Bunkhouse <input type="checkbox"/> Newly Renovated Bunkhouse	<input type="checkbox"/> Routine Inspection <input type="checkbox"/> Re-inspection/ Water Re-sample
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			<input type="checkbox"/> New Bunkhouse <input type="checkbox"/> Newly Renovated Bunkhouse	<input type="checkbox"/> Routine Inspection <input type="checkbox"/> Re-inspection/ Water Re-sample

## FOR OFFICE USE ONLY

<b>Date Fee Received:</b>	
<b>Receipt Number:</b>	
<b>Amount Received:</b>	

## HNHU Comments

Updated January 22, 2024



[www.hnhss.ca](http://www.hnhss.ca)

519-426-6170 • 905-318-6623 • 519-582-3579

