



## LAWRENCE COUNTY HEALTH DEPARTMENT

2122 So. 8<sup>th</sup> Street  
Ironton, OH 45638  
740-532-3962

Tony Virgin, MD  
Health Commissioner



**Public Health**  
Prevent. Promote. Protect.  
Lawrence County Health Department

Jim Meadows, MD  
Medical Director

### Request for Sale of Property Inspection

*Sale of Property Inspection **may take up to 14 days** from date of request to complete. This form is to be completed by the seller or an agency and submitted with a **\$300.00 inspection fee** to the Lawrence County Health Department.*

**Property Address:** \_\_\_\_\_

**Name of Seller:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Address of Seller (if different from above):** \_\_\_\_\_

**Agent/Agency Requesting Inspection:** \_\_\_\_\_

**Address of Agency:** \_\_\_\_\_

**Phone Number of Agent:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Directions to Property/Remarks:**

\_\_\_\_\_  
\_\_\_\_\_

**Property Occupied?** ☐ Yes ☐ No **Is there an outside water spigot?** ☐ Yes ☐ No

**Type of Water Supply:** ☐ Public ☐ Well ☐ Cistern ☐ Spring

☐ Other: \_\_\_\_\_

*It is recommended to retest all non-public water sources every 3-5 years to ensure water quality.*

\_\_\_\_\_  
**Signature of Seller or Representative**

\_\_\_\_\_  
**Date**



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**\*\*\* FOR OFFICE USE ONLY \*\*\***

### Inspection

**Research and Observations** (*attach additional sheets as necessary*): \_\_\_\_\_

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**Results** (*attach additional sheets as necessary*): \_\_\_\_\_

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*Sanitarian/EH Technician Signature*

\_\_\_\_\_  
*Date*