



BOH Forms: #8 Permit Log for 20____

Board of Health and Local Health Department Standard Operating Procedures (SOP)

This **Log** can be used to track all BOH work. Complete Daily. Person completing a section should initial.

The Log is designed to be used in tandem with the **BOH SOP and Appendices**. BOXES CAN BE CHECKED WITH the CURSOR.

Permit #	Issue Date	Application Type	Fee Paid	Permit Issued to:	Follow Up Needed	Completed Initials
20__-01					<input type="checkbox"/>	
20__-02					<input type="checkbox"/>	
20__-03					<input type="checkbox"/>	
20__-04					<input type="checkbox"/>	
20__-05					<input type="checkbox"/>	
20__-06					<input type="checkbox"/>	
20__-07					<input type="checkbox"/>	
20__-08					<input type="checkbox"/>	
20__-09					<input type="checkbox"/>	
20__-10					<input type="checkbox"/>	
20__-11					<input type="checkbox"/>	
20__-12					<input type="checkbox"/>	
20__-13					<input type="checkbox"/>	
20__-14					<input type="checkbox"/>	
20__-15					<input type="checkbox"/>	

Person Completing this Form:

Date:

Permit #	Issue Date	Application Type	Fee Paid	Permit Issued to:	Follow Up Needed	Completed Initials
20__-16					<input type="checkbox"/>	
20__-17					<input type="checkbox"/>	
20__-18					<input type="checkbox"/>	
20__-19					<input type="checkbox"/>	
20__-20					<input type="checkbox"/>	
20__-21						
20__-22						
20__-23						
20__-24						
20__-25						
20__-26						
20__-27						
20__-28						
20__-20						
20__-30						
20__-31						

Person Completing this Form:

Date: