



Arkansas Department of Health Project Cost Estimate Worksheet

As required by A.C.A. § 20-7-123, this worksheet must be completed and submitted with appropriate fee(s)

PROJECT NAME _____

PROJECT ID# (ADH Use Only)

COUNTY _____

PROJECT LOCATION (911 if available) _____

CITY, STATE, ZIP _____

OWNER/SUBMITTER NAME _____ PHONE _____

MAILING ADDRESS _____

CITY, STATE, ZIP CODE _____

EMAIL (if available) _____

COST ESTIMATE: ESTIMATED COST SHALL BE BASED ONLY ON THOSE IMPROVEMENTS THAT REQUIRE A DEPARTMENT OF HEALTH REVIEW

1. WATERSYSTEM IMPROVEMENTS (non-plumbing)..... \$ _____

For questions regarding water system improvements ENGINEERING (501) 661-2623

2. SEWER SYSTEM IMPROVEMENTS (non-plumbing)..... \$ _____

For questions regarding sewer system improvements ENGINEERING (501) 661-2623

3. PLUMBING..... \$ _____

For questions regarding plumbing plans (501) 661-2650

4. SWIMMING POOL (public)..... \$ _____

For questions regarding swimming pool plans (501) 661-2171

5. FOOD SERVICE-Retail or Wholesale/Manufacturing (new/reno) \$ _____

For questions regarding food establishment plans (501) 661-2171

TOTAL ESTIMATED COST \$ _____

A. PLAN REVIEW FEE..... \$ _____

1% of total est. cost, not less than \$50.00 and not to exceed \$500.00

(See #1 onpage 2)

TOTAL FEES SUBMITTED \$ _____

(Checks or money orders made payable to ADH)

PREPARED BY: _____ DATE _____

PRINT NAME: _____

EXPLANATION OF PLAN REVIEW FEES

#1) A.C.A. § 20-7-123 establishing a fee for the review of plans and specifications which are required by law or regulation to be reviewed by the Department (*Line items # 1,2,3,4,5 on page 1*). The fee is **1%** of the estimated cost of improvements, with a **minimum fee of \$50.00** and a **maximum fee of \$500.00**. An Engineering estimate must accompany the plans unless the maximum fee of \$500.00 is paid.

IF TOTAL ESTIMATED COST IS **\$5,000.00 OR LESS**, REVIEW FEE IS **\$50.00**.
 IF TOTAL ESTIMATED COST IS **\$50,000.00 OR MORE**, REVIEW FEE IS **\$500.00**.
 IF TOTAL ESTIMATED COST IS BETWEEN **\$5,000.00 AND \$50,000.00**, CALCULATE AS FOLLOWS:

PLAN REVIEW FEE = (0.01) x (TOTAL ESTIMATED COST) = \$ _____

Complete Below Only for plans utilizing onsite wastewater systems including subdivisions containing lots < 3 acres, mobile home and RV parks.

#2) A.C.A. § 14-236-116 establishing a fee for the review of plans for subdivisions containing lots <3 acres utilizing individual onsite wastewater systems.

Subdivisions on Individual Onsite Wastewater:

FIRST LOT @ **\$100.00** \$ 100
 ADDITIONAL LOTS @ **\$25.00/each**\$ _____
TOTAL \$ _____
 (Maximum Fee = **\$1500.00**)

#3) A.C.A. § 20-27-1201 established a review fee for Mobile Home Parks and Recreational Vehicle Parks utilizing onsite wastewater systems and is based on the number of spaces.

Mobile Home & RV Parks utilizing Onsite Wastewater Systems:

2-25 SPACES..... **\$25.00**
 26-50 SPACES..... **\$50.00**
 51-75 SPACES..... **\$75.00**
 76 OR MORE..... **\$100.00**

PLAN REVIEW FEE:

Total Submitted (#2 + #3) _____
 (Checks or money orders payable to ADH)

For more information regarding Sections #2 and #3, please contact ADH Engineering 501-661-2623.