CAYMAN ISLANDS
DEPARTMENT OF ENVIRONMENTAL HEALTH (DEH)

Request for Environmental Health Inspection for
Trade & Business Licensing (Re-newal)

This Box is for Official Use Only
T&B Ref.___________   DEH Ref.___________
New Business_________   Environmental Health Fees: ____________

The applicant should complete the section below. Please print the required information

1. Name of Applicant:

2. Name of Business:

3. Type of Business:

4. Proposed Business Location:_____________________________________________________
   Old Address/Location

5. Street Name:

6. Mailing Address:

7. Telephone Number:

8. Block & Parcel Number:          Block:  ______________         Parcel:________________

9. Building/House Number:          Building Number :__________

Proposed Plan / Layout
Operators Certification

State details of the proposed business (additional sheets paper may be used, as necessary):
Please include a plan layout, method, preparation, storage and transportation, etc):

__________________________________________________________

__________________________________________________________

__________________________________________________________

Application’s Signature: _______________________________ Date: _____________________

In an effort to reduce delays, please complete all of the details required above.
However, additional information may be requested by DEH

Please Deliver or Mail the form to:
Department of Environmental Health
Cayman Islands Environmental Center, 580 North Sound Road
Box 1820, Grand Cayman, Cayman Islands KY1-1109
Office Telephone : (345) 9496696     Fax: (345) 9494503     Revised May 2013