

CRAWFORD COUNTY HEALTH DEPARTMENT FEE SCHEDULE

ENVIRONMENTAL HEALTH SERVICES	FEE
Food Permits:	
Retail Establishment	
1-4999 sq ft	50.00
5000-15,000 sq ft	100.00
over 15,000 sq ft	200.00
Food Service Establishment	
Category I	150.00
Category II	125.00
Category III	100.00
Permit Late Fee (after 30 days)	50.00
Temporary (single event)	30.00
Temporary Non-Profit	0.00
Seasonal/Temporary (2 or more single events)	50.00
Temporary Late Fee Assessed (after 14 days)	25.00
Mobile Permits (6 months or less)	40.00
Plan Review (non-commercial)	100.00
Plan Review (Commercial)	200.00
Follow-up Inspection	25.00
Water Application:	
New Permit (checks payable to IDPH)	100.00
Sampling/Testing:	
Water Test Kit for Pickup	25.00
WIC Client/Doctor Request	0.00
Onsite Collection and Inspection	50.00
Farmersburg Lab Kit Dispensing	Contact Lab
Septic Application:	
Septic Installation (outside of operating hours)	+40.00/hr
Septic Permit	100.00
IMMUNIZATIONS	
	*FEE
Dtap (Infarix)	45.00
Dtap-IPV-Hep B (Pedarix)	120.00
Dtap-IPV (Kinrix)	75.00
Hep A Adult	105.00
Hep A Pediatric	50.00
Hep B Adult	100.00
Hep B Pediatric	45.00
Hib (Pedvax)	40.00
HPV (Gardasil)	305.00
Influenza 6-35 mo (no pres)	40.00
Influenza 3+ years	40.00
Influenza (Fluzone High Dose)	80.00
Meningitis (Bexsero)	245.00
Meningitis (MCV4)	175.00
MMR	110.00
MMRV (Proquad) MMR & Varicella	300.00
PCV 13 (Prevnar 13)	270.00
Pneumonia 23 (Adult & Pediatric)	145.00
Polio IPV	55.00
Rotavirus 2 dose (Rotarix)	170.00
Shingles (Shingrix)	210.00
Td - Tetanus/Diphtheria	50.00
Tdap (Boostrix)	60.00
Varicella (Varivax) Chickenpox	185.00

LAB SERVICES	FEE
Handling/Conveyance of Specimen to Lab	15.00
Hemoglobin (Finger stick)	5.00
Lab Draw Fee (Venipuncture)	30.00
Lab Test Services	call
Lead Screening Adult	45.00
Lead Screening Child (Age 0-6 years free if income eligible)	25.00
Pregnancy Testing	15.00
TB Skin Test (per test)	15.00
Urine 10 Drug Screening	45.00

***Please add appropriate administration fee to each immunization.**

IMMUNIZATION ADMINISTRATION	FEE
Single	\$20
Each Additional	\$10
ORAL/INTRANASAL	
Single	\$20
Additional	\$10

*Please note the total cost for immunizations will include the cost of each vaccine plus appropriate administration fee(s).

ALL PRICES ARE SUBJECT TO CHANGE WITHOUT NOTICE

+Septic installations conducted outside of normal operating hours will incur a charge for mileage reimbursement at the current IRS mileage rate and the hourly rate will apply to travel time.