



**FOOD ESTABLISHMENT PERMIT APPLICATION**

CIRCLE ONE:                    NEW ESTABLISHMENT                    RENEWAL                    AMENDED

Name of Establishment: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: TX Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone # \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Days/Hours of operation \_\_\_\_\_

Total Number of Employees: \_\_\_\_\_ IF DAYCARE # of Children (licensed for) \_\_\_\_\_

**Water:**    Public                    Private

**Wastewater:**            Public                    Private

**Food establishment employees and daycare kitchen employees must possess a CURRENT Food Handler card within 60 days of employment.**

**Extra fees will be charged with your yearly permit fee for compliance inspections conducted at your establishment during a calendar year**

**Permits must be renewed every year before close of business December 31; late fees will be assessed after January 31 the following year.**

**Operating an establishment without a current permit is in violation of City and County Regulations. Legal action may be imposed against such an operation.**

**I HAVE READ AND UNDERSTAND THE CONDITIONS OF THIS APPLICATION / PERMIT:**

\_\_\_\_\_  
**Applicant Signature**

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

-----DO NOT WRITE BELOW THIS LINE-----

\_\_\_\_\_  
Date Paid

\$ \_\_\_\_\_  
Amount Paid

\_\_\_\_\_  
Permit #

Receipt # \_\_\_\_\_

Check / Money Order # \_\_\_\_\_

Cash \_\_\_\_\_                    Credit Card \_\_\_\_\_

Revised 04-06-18