

Vanderburgh County Health Department

420 Mulberry Street
Evansville IN 47713-1231

(812) 435-5695 **Phone** (812) 435-5871 **Fax**

APPLICATION FOR 2016 FOOD PERMIT

Establishment Type: MOBILE FOOD SERVICE

Note: All fields must be completed.

Facility Name: _____

Address: _____

City: _____ State: IN Zip: _____ Phone: _____ Fax: _____

.....
Owner Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____

Email: _____

Which address should the PERMIT be mailed to: Facility: _____ Owner: _____

Which address should FUTURE APPLICATIONS be mailed to: Facility: _____ Owner: _____

Certified Food Safety Employee: _____

Manager Name: _____ **Business Hours:** _____

LOCATION OF COMMISSARY/ LICENSED FACILITY: (COPY OF PERMIT REQUIRED).

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____

Check appropriate box for: **MOBILE FOOD SERVICE ESTABLISHMENT**

Annual Permit Fee: \$100.00	<input type="checkbox"/>	
Permit Fee After June 30 th : \$75.00	<input type="checkbox"/>	

Amount of Fee Submitted: \$ _____

Method of Payment: Cash ___ Check ___ Money Order ___ Credit Card ___

Cash or Card payments accepted in person at the Environmental Division, 3rd floor, VCHD.
Credit and debit card payments are assessed a convenience fee, minimum \$3.95 or 2.5% of pmt.
Picture ID is required and must match the name on card.

Note: A late fee of \$100.00 will be charged for all applications received after the deadline of **March 1st** for renewal, or 30 days after the final approval for new facilities or change of ownership.

SIGNATURE: _____ **DATE:** _____