

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: SEASONAL FOOD SERVICE OPERATION

Note: All fields must be completed.

Facility Name: _____

Address: _____

City: _____ State: ____ 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: _____

Location of Seasonal Facility _____

Responsible Person's Name: _____ Business Hours: _____

Has ownership changed within last 12 months (Y/N) _____

Check appropriate boxes for: **SEASONAL FOOD SERVICE OPERATION**

Snow Cone/Pre-pkgd/Veg. Stand	<input type="checkbox"/>	\$100.00	<input type="checkbox"/>	<input type="checkbox"/>
Farmers Market / Master	<input type="checkbox"/>	\$100.00	<input type="checkbox"/>	<input type="checkbox"/>
Farmers Market Temporary Service	<input type="checkbox"/>	\$10 per day \$30 maximum per event	<input type="checkbox"/>	<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: _____