

CITY OF BRENHAM

2015 FOOD ESTABLISHMENT PERMIT APPLICATION

Note: Your current Food Establishment Permit expires on December 31, 2014

Note: This completed application must be returned with the required fee of \$100.00 (or \$25.00 for a Bed and Breakfast establishment) by January 1, 2015.

Note: Application for a permit postmarked or received after January 1, 2015 will have a \$25.00 late charge added to the permit fee.

Note: If this application and fee are not received by 5:00 p.m. on January 8, 2015, your food establishment operation will be suspended. Suspension notification will begin on January 9, 2015.

Note: Operating an establishment without a CURRENT permit is a violation of City regulations. Legal action or closure may be imposed against such an operation.

CURRENT PERMIT #: _____

ESTABLISHMENT NAME: _____

ESTABLISHMENT ADDRESS: _____

MAILING ADDRESS: _____

BUSINESS PHONE: _____ OWNER PHONE: _____

OWNER EMAIL ADDRESS: _____

HOURS OF OPERATION:

Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday	
a.m.		a.m.		a.m.		a.m.		a.m.		a.m.		a.m.	
p.m.		p.m.		p.m.		p.m.		p.m.		p.m.		p.m.	

Number of Employees (including management): _____

Name of Certified Food Manager(s) (CFM): _____

CFM Certification Program: _____

CFM Certification Expiration Date(s): _____

Grease Trap/Interceptor Information:

Location: _____ Size: _____ gal/lbs Service Frequency: _____

Name of Hauler _____

Address _____

City _____ State _____ Zip _____

Pest Control Information:

Company Name: _____ Service Frequency: _____

Address: _____

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

I HAVE READ AND AGREE TO THE CONDITIONS OF THIS APPLICATION/PERMIT.

APPLICANT'S NAME: _____
(PLEASE PRINT CLEARLY)

APPLICANT'S SIGNATURE: _____

DATE: _____

This completed application and the required fee must be submitted to the Development Services Department (979-337-7220), located on the first floor of City Hall (200 W. Vulcan St. Brenham, TX 77833); or they can be mailed to:

City of Brenham
Attn: Development Services Dept.
P.O. Box 1059
Brenham, TX 77834-1059

<u>OFFICE USE ONLY</u>			
DATE PAID: _____	RECEIPT #: _____		
CHECK #: _____	CASH: _____		
RENEWAL	NEW OWNER	NAME CHANGE	NEW ESTABLISHMENT
ISSUED BY: _____			DATE: _____