



PERMANENT FOOD ESTABLISHMENT PERMIT APPLICATION

BUILDING & COMMUNITY SERVICES

PERMIT # _____

NEW RENEWAL

ALL FOOD ESTABLISHMENT PERMITS EXPIRE ONE YEAR FROM THE DAY OF ISSUE.

ESTABLISHMENT NAME _____ PHONE# _____

ADDRESS _____ EMAIL# _____

CERTIFIED FOOD MANAGER AND CERTIFICATE EXP DATE _____

SQUARE FOOTAGE _____ DAYS AND HOURS OF OPERATION _____ # OF EMPLOYEES _____

FEES:

- \$125 FACILITIES WITH 1,000 OR LESS SQUARE FEET
- \$175 FACILITIES WITH 1,001 TO 5,000 SQUARE FEET
- \$225 FACILITIES WITH 5,001 TO 10,000 SQUARE FEET
- \$300 FACILITIES WITH 10,001 OR MORE SQUARE FEET

HAVE THERE BEEN ANY CHANGES TO THE FOOD ESTABLISHMENT (I.E.:REPLACE/ADD EQUIPMENT, MENU CHANGES, OR CONSTRUCTION/REMODEL)? YES NO IF YES, PLEASE EXPLAIN BELOW:

BUSINESS OWNERS INFORMATION

Name(s): _____

Home Phone #: _____

Home Address: _____

City / ST / Zip _____

E-Mail: _____

PROPERTY OWNER INFORMATION

Name(s): _____

Phone #: _____

Address: _____

City / ST / Zip _____

E-Mail: _____

APPLICANT SIGNATURE: _____ DATE: _____

APPLICANT NAME (Please Print): _____

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