



# Decatur County Health Department

801 North Lincoln St. Greensburg, IN 47240 Phone (812)663-8301 Fax (812)663-4174

Fill out this form as you want it to appear on your permit. **An incomplete form will not be processed for a permit.** Temporary Permits must be issued one (1) week prior to operation and may be used only during the time specified on the permit.

## 2012 Annual Food Service Permit Application

Valid from January 1<sup>st</sup>- December 31<sup>st</sup> 2012

Please check one:     Yearly Renewal     New (**must include a menu**)     Temporary

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

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

Mailing Address: \_\_\_\_\_

Establishment Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address of Owner: \_\_\_\_\_

Name of Person in Charge: \_\_\_\_\_ Title: \_\_\_\_\_

Person in Charge has the oversight of a zone, district or region.

Telephone (Person in Charge): \_\_\_\_\_ Telephone (Operator): \_\_\_\_\_

Name of Operator: \_\_\_\_\_ Title: \_\_\_\_\_

Operator has oversight of the preparation or serving of food at the establishment.

Name of Certified Food Handler(s): \_\_\_\_\_ Date of Exam \_\_\_\_\_

Type of Business:     Bed and Breakfast     Retail Food     Temporary     Mobile

Signature of Applicant(s): \_\_\_\_\_

Printed Name of Applicant(s): \_\_\_\_\_

### Permit Fees

Permits are \$40 for all Bed and Breakfast, Retail Food and Mobile Permits.

Temporary Permits are \$15 and **must be submitted to the health department 7 days prior** to the event to ensure a permit will be issued. Failure to secure a permit may prevent operation at the event.

Make all checks and money orders to the Decatur County Department of Health.

For Temporary Food Permits: Event: \_\_\_\_\_ Date(s) \_\_\_\_\_

Set-Up Time: \_\_\_\_\_ Times of Operation: \_\_\_\_\_