



City Of Beeville
RETAIL FOOD OPERATION PERMIT APPLICATION

Return completed application and cash, check, credit card or money order fee payable to: City of Beeville, at the Developmental services -Food Services, 400 N. Washington, Beeville, Texas 78102. For additional permitting assistance call (361) 358-4641.

FAILURE TO PROVIDE ALL INFORMATION WILL DELAY PERMIT

BUSINESS INFORMATION:

Name under which business is conducted: _____

Business Owner Name (s): _____

Driver License Number: _____ Date of Birth: _____

Physical Location: _____ / _____ / _____
Address City Zip Code

Mailing Address: _____ / _____ / _____
Address City Zip Code

Phone number at site: _____

Other phone number: _____

Fax number: _____ E-Mail Address: _____

Type of Permit for Retail Food Operation

_____ Food Service Establishment

_____ Retail Food Store

_____ Institutional Food Service

_____ School/Childcare

_____ Roadside Food Vendor

_____ Amended Application

_____ Mobile Unit

_____ Change of Ownership: Name of previous owner _____

_____ Change Of Location: Effective date of change _____

_____ Change Of Name: Previous name _____

_____ Other _____



Retail Food Operation Information

Proposed open Date: _____

Days and Hours of Operation: _____

List type of foods to be sold: _____

Number Of employee (Include management, family and owners): _____

Number Of employee's that have Food Handler's cards _____

Number of employees that have Food Manager's Certification: _____

VERIFICATION: I swear or affirm that the above statements are true and correct. I further certify by signature hereon, that I am not currently delinquent in the payment of any Corporation franchise Taxes owed the state of Texas under Chapter 171, Tax Code; nor am I delinquent in the payment of any child support owned under chapter 232, Family Code. I Further Certify that I have read and understood the applicable provisions of 25 TAC, Chapter 229 and Chapter 437 of the Health and Safety Code and agree to abide by them.

Signature of Owner, Partner, President, Date
Or Corporation Designee (cannot be manager)

Date

Print Name