



Brazos County Health District
 201 N Texas Ave
 Bryan Texas 77803-5317
 (979) 361-4450



CITY EXTENDED TEMPORARY

2020 Permit Application

PERMIT #: _____

Permit Fee Due: <u>\$200.00</u>	Late Payment Fee Due: <u>\$0.00</u>
Extra Fee Due: <u>\$0.00</u>	TOTAL FEE(S) DUE: <u>\$200.00</u>

PLEASE CORRECT/COMPLETE AND RETURN WITH REQUIRED FEE

Is establishment inside or outside city limits: _____

ESTABLISHMENT NAME: _____

Address of Operation: _____ **City:** _____

State: _____ **Zip:** _____ **Phone:** _____

OWNER: _____

Street: _____ **City:** _____

State: _____ **Zip:** _____ **Phone:** _____

Email Address: _____

Days of operation: _____

Hours of operation: _____

CURRENT/ANTICIPATED NUMBER OF EMPLOYEES: _____ (including management)

Note: All employees must have a valid food handler card.

Operating an establishment without a CURRENT permit is in violation of City or County Regulations.

Legal action or closure may be imposed against such an operation.

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

 Applicant's Signature

 Date

-----OFFICE USE ONLY-----

DATE PAID _____ RECEIPT# _____ CHECK# _____ CASH _____ CREDIT/DEBIT _____

RENEWAL

NEW OWNER

NAME CHANGE

NEW ESTABLISHMENT