



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



CITY PERMIT-MEDIUM/HIGH RISK

2023 Permit Application

PERMIT #: _____

| | | | |
|-----------------|------------------------|--------------------------|------------------------|
| Permit Fee Due: | <u>\$700.00</u> | Late Payment Fee Due: | <u>\$0.00</u> |
| Extra Fee Due: | <u>\$0.00</u> | TOTAL FEE(S) DUE: | <u>\$700.00</u> |

PLEASE CORRECT/COMPLETE AND RETURN WITH REQUIRED FEE

ESTABLISHMENT NAME: _____

Street: _____ City: _____

State: _____ Zip: _____ Phone: _____

OWNER: _____

Mailing Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Email Address: _____

Certified Food Manager: _____

Manager's Certification Expiration Date: _____

List your public water source: _____

List your sewage disposal: Public _____ Private Septic/OSSF# _____

CURRENT NUMBER OF EMPLOYEES: _____ (including management)

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