

Brazos County Health Department
201 N Texas Ave
Bryan Texas 77803-5317
(979) 361-4440

2010 Permit Application Current Permit Expires: 12/31/09 **PERMIT #:** _____

Permit Fee Due: **\$400.00** Late Payment Fee Due: **\$0.00**

2010 Extra Fee Due: **\$0.00** **TOTAL FEE(S) DUE: \$400.00**

PLEASE CORRECT/COMPLETE AND RETURN WITH REQUIRED FEE

ESTABLISHMENT NAME: _____

Street: _____ City: _____

State: _____ Zip: _____ Phone: _____

OWNER: _____

Street: _____ City: _____

State: _____ Zip: _____ Phone: _____

Certified Food Manager: _____

Manager's Certification Expiration Date: _____

Email Address: _____

Circle one of the following water supplies: Public Well TNRCC#: _____

Enter hours of operation: _____

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

LICENSED CAPACITY OF CHILDREN: _____ (child care facility)

Late fees will be charged for permit fees not paid by the expiration date of January 31st.

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.

Manager's Email Address

Applicant's Signature

Date

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

DATE PAID _____ RECEIPT # _____ CHECK# _____ CASH _____

RENEWAL NEW OWNER NAME CHANGE NEW ESTABLISHMENT

ISSUED BY _____ DATE _____