

**FANNIN COUNTY
HEALTH DEPARTMENT**

101 E. Sam Rayburn #101
Bonham, TX 75418 (903)583-7455



**RETAIL FOOD ESTABLISHMENT
PERMIT APPLICATION**

INSTRUCTIONS: (1) Complete all information below (2) Arrange for all employees to obtain employee permits* (3) Submit fee to FCHD

<p>ESTABLISHMENT <input type="checkbox"/> Renewal <input type="checkbox"/> New owner <input type="checkbox"/> Name or location change</p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Tel: _____ Fax: _____</p> <p>General Manager: _____</p> <p>E-Mail: _____</p> <p>Send permit and renewal notice to: <input type="checkbox"/> Establishment <input type="checkbox"/> Owner</p>	<p style="text-align: right;">OWNER</p> <p>Name _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Tel: _____ Fax: _____</p> <p>APPLICANT'S NAME</p> <p>Signature: _____</p> <p>Print: _____ Date: _____</p>
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DAYS AND HOURS OF OPERATION						
Sun	Mon	Tue	Wed	Thurs	Fri	Sat

✓ ANNUAL FEE SCHEDULE	
5 or more employees	\$150
1 to 4 employees	\$100
Snow Cone, Mobile, Concession	\$100
Temporary (1 to 4 days)	\$25
Food manager registration	\$25
Exempt (IRS verification)	\$00
Late fee penalty	\$50
NOTE: THE TOTAL NUMBER OF EMPLOYEES SHALL NOT EXCEED THE NUMBER CHECKED ABOVE THROUGHOUT THE DURATION OF THE PERMIT. NOTIFY HEALTH DEPARTMENT IF EMPLOYEES INCREASE.	TOTAL \$

*EMPLOYEE PERMITS		
	Type	Number
<p>FOOD MANAGERS</p> <p>(minimum of 1 if potentially hazardous food is served)</p>	<p>Names: _____</p> <p>Expiration: _____</p> <p>_____</p> <p>_____</p> <p>Please submit a copy of the manager's certificate with a \$25 fee</p>	
<p>FOOD HANDLERS</p>	<p>Includes cooks, bartenders, waiters, servers, drivers, sampling booths, dishwashers, bus persons, persons handling ice, etc. whether full or part-time</p>	
TOTAL FOOD MANAGERS AND FOOD HANDLERS		

CLASSES (Call for enrollment)	
Food Manager (12 hours)	Sherman (903-815-1286) English Sherman (903-816-1601) English/Spanish Denison (903-463-8731) English
Food Handler (1 hour)	Bonham (905-583-7455) English Time: 5:30 pm (runs 6:00 to 7:00 pm) Cost: \$15 per person (Cash or company check) Location: Courthouse 101 E. Sam Rayburn Room 101 Bonham, TX

HEALTH DEPARTMENT USE ONLY	
RECEIPT NO: _____	PERMIT TYPED: _____
DATE PAID: _____	PERMIT MAILED: _____
POSTMARK: _____	PERMIT EXPIRES: <div style="border: 2px solid black; width: 80px; height: 20px; display: inline-block;"></div>
LATE FEE: _____	
INITIALS: _____	
Rev 3/06	

This permit is nontransferable. A new permit is required for new owners, change of name, or location. Nonprofit facilities shall have a 26 USC Section 501c3 exemption on file. A late fee of \$50 is assessed if postmarked after expiration date. Make check payable to FCHD. \$25 fee for returned checks.

**THIS IS A PUBLIC DOCUMENT AND IT IS UNLAWFUL TO
KNOWINGLY PROVIDE FALSE INFORMATION**