

BOWIE COUNTY
FOOD OPERATIONS APPLICATION
INITIAL, RENEWAL, OR CHANGE OF OWNERSHIP

Return both the completed application and **non-refundable** fee to:

PERMIT #:

BOWIE COUNTY TREASURERS OFFICE
 710 James Bowie Drive
 New Boston, TX 75570
Pay by Check, Money Order or Exact Cash

Name Under Which Business is Conducted (DBA): _____
 Physical Address to be Licensed: _____
 City, County, State, Zip Code: _____
 Telephone # at address: () _____ Is physical address within the city limits? Yes No
 Telephone Residence: () _____
 Telephone Manager: () _____
 Email Address: _____

New (Initial) Start Date of Regulated Activity: _____
 Change of Ownership: _____
 Renewal: Renewals are valid from the anniversary date.
 Notice that firm is out of business. Date: _____ Sign and date. _____ Return for deletion from our records.

LICENSE HOLDER INFORMATION:
 Please enter the 11 digit State Tax payer's Identification number on file with the Texas Pubic Accounts. _ - _ - _ - _ - _ - _ - _ - _ - _

Food Establishment- any place where food is prepared and intended for individual portion service. This includes the site at which individual portions are provided for consumption on or off the premises and regardless of whether there is a charge for the food, bed & breakfasts with >7 rooms, restaurants, bars, cafes, snack bars, hospitals that serve food to the general public, correctional facilities (jails) that contract with professional food management corporations for food preparation, privately-owned correctional facilities, etc.

Retail Food Store- a food establishment or section of an establishment where food and food products are offered to the consumer and intended for off-premise consumption. This includes delicatessens that offer prepared food in bulk quantities only, grocery stores, markets, etc.

PERMIT FEES INITIAL/RENEWAL

Restaurant ----- \$ 175.00
 Store ----- \$ 175.00
 Store with Deli ----- \$ 350.00
 Store with Deli and Bakery ----- \$ 525.00
 Schools (each Inspection) ----- \$ 100.00
 Mobile Food Trucks or Trailers ----- \$ 175.00
 Special Event Fee not to exceed 14 days. \$ 75.00

Fees are non-refundable

Hours of Operation: Hours: _____ to _____
Circle days of the week: M T W T F S S
Water Supply: City Well Holding Tank
Sewer: City Holding Tank
 If using holding tanks you must provide letter for sewer disposal.

Name, Address and email of person required to pay permit of renew: Name or Corporation: _____
 Address: _____

VERIFICATION: I SWEAR OR AFFIRM THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT. I FURTHER CERTIFY BY SIGNATURE HEREON, THAT I AM AUTHORIZED TO EXECUTE THIS DOCUMENT ON BEHALF OF THE CORPORATION AND AM ELIGIBLE TO RECEIVE A LICENSE. IF SIGNING THIS AS OWNER OF A SOLE PROPRIETORSHIP, I FURTHER CERTIFY THAT I HAVE READ AND UNDERSTAND CHAPTER 437 OF THE HEALTH & SAFETY CODE, THE APPLICABLE PROVISIONS OF 25 TEXAS ADMINISTRATIVE CODE, CHAPTER S228 & 229, AND AGREE TO ABIDE BY THEM.

Signature _____ OWNER _____ Date _____
 PARTNER
 PRESIDENT
 CORPORATE DESIGNEE / AGENT
 Printed Name & Title _____