

Permit # _____
 Date issued _____
 Date Mailed _____



**AMARILLO BI-CITY-COUNTY HEALTH DISTRICT
 CITY OF AMARILLO
 ENVIRONMENTAL HEALTH DEPARTMENT
 PO BOX 1971 AMARILLO TX 79105-1971
 APPLICATION FOR A FOOD ESTABLISHMENT PERMIT**

Receipt # _____
 Date Paid _____
 Date Expires _____

**(806) 378-9472
 TDD 378-4229**

Establishment Name _____

Owner's Name _____

Establishment type _____

Will you be selling/serving any alcohol _____

Physical Address _____

Owner's Address _____

City _____

City _____

State _____

State _____

Zip Code _____

Zip Code _____

Mailing Address _____

Establishment's phone _____

City _____

Email address _____

State _____

Fax Number _____

Zip Code _____

Owner's phone _____

If the building is new or if extensively remodeled or additional plumbing fixtures added, plans and or permits may be required by the Code Enforcement department

	Yes	No		Yes	No
Is smoking allowed in building	<input type="checkbox"/>	<input type="checkbox"/>	Is there a service sink or mop sink in the building	<input type="checkbox"/>	<input type="checkbox"/>
If yes do you comply with the Smoking Ordinance	<input type="checkbox"/>	<input type="checkbox"/>	Is there a salad or buffet line	<input type="checkbox"/>	<input type="checkbox"/>
Is there a three compartment utensil sink installed	<input type="checkbox"/>	<input type="checkbox"/>	Are there sneezeshields installed over food and utensils	<input type="checkbox"/>	<input type="checkbox"/>
Are there drain boards or self draining shelves	<input type="checkbox"/>	<input type="checkbox"/>	Do all refrigerated food units hold 41 F or cooler	<input type="checkbox"/>	<input type="checkbox"/>
Is there a hand sink in the food preparation area	<input type="checkbox"/>	<input type="checkbox"/>	Are all shelves metal in food storage and holding units	<input type="checkbox"/>	<input type="checkbox"/>
in the food dispensing area	<input type="checkbox"/>	<input type="checkbox"/>	Do employees change clothes at the establishment	<input type="checkbox"/>	<input type="checkbox"/>
in the utensil washing area	<input type="checkbox"/>	<input type="checkbox"/>	Are there 4 or more employees	<input type="checkbox"/>	<input type="checkbox"/>

We recommend that you familiarize yourself with the City Ordinances and the State Food Establishment Rules (TFER) regarding the laws established for the sale and service of food and drinks. Amarillo and Canyon have ordinances in addition to the State Rules. The State law applies in both Potter and Randall Counties.

It is hereby stipulated and agreed by the undersigned who is the applicant for such permit, that in consideration for the issuance of such permit, the said applicant will confirm with all the provisions of said Ordinances and with all orders that may be made from time to time by the Health Officer or his representative, and it is further stipulated and agreed that the Health Officer or his representative is granted permission to inspect the premises and equipment of the undersigned in so far as it pertains to the conduct of his/her business or provisions of the Ordinances and that the information given herein is true and correct.

IT IS FURTHER AGREED THAT AN ANNUAL FEE OF _____ WILL BE PAID IN ADVANCE FOR SUCH PERMIT.

Occupancy load/sq. footage _____

 Applicant's Signature