

Permit # _____
 Date Issued _____
 Date Mailed _____



Receipt # _____
 Date Paid _____
 Date Expires _____

Phone: (806)-378-9472
 Fax: (806)-378-3585

TDD: (806)-378-4229
 ehealth@amarillo.gov

Amarillo Area Public Health District

Application for a Permit to Operate a Food Establishment

Name of Establishment: _____

Establishment Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Establishment Contact Information: Phone: _____ Fax: _____ Email: _____

Name of Owner or Corporation: _____ Attention: _____

Owner's Mailing Address: _____ City: _____ State: _____ Zip: _____

Owner's Contact: Phone: _____ Fax: _____ Email: _____

Which best describes this application: Change of Owner New Establishment

Where does the Food Establishment permit need to be mailed? Establishment Owner/Corporation

Will any alcohol be sold or served? Yes No

Occupancy load: _____ Square Footage: _____

Permit Fees:	Occupancy Loads:	If ≤50% of business is off-premise consumption:
Application Fee \$28	0 to 50 \$274	0-500 sq. ft. \$274
Plan Review Fee \$94	51 to 150 \$384	501-3000 sq. ft. \$384
Technology Fee \$10	151 to 250 \$493	3001-5000 sq. ft. \$493
Out Of City Limits Fee \$52	251 to 350 \$603	5001-15000 sq. ft. \$603
	Over 350 \$712	Over 15000 sq. ft. \$712

Caterer, Mobile Food Unit, Schools, Prepackaged and Daycare Facilities	\$274
Fire Marshal Inspection Fee (Mobile units only)	\$40
Waste Water Pre-treatment Permit	\$85 (Plus Technology Fee)
TCS Vending Machine/Snack Only Childcare Facilities	\$111

Applicant's signature _____ Hours of operation _____

Mail Application and Permit Fee To
Environmental Health Department
PO Box 1971
Amarillo, TX 79105-1971

Physical Address
Environmental Health Department
808 S. Buchanan
Amarillo, TX 79101