

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 Farmers Market

Name of Market: \_\_\_\_\_

Site: Location and address: \_\_\_\_\_

Name of person/business requesting permit: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email address: \_\_\_\_\_

Contact Number: \_\_\_\_\_

### FOOD

Describe or list all consumable products that you plan on having at your market:

\_\_\_\_\_

\_\_\_\_\_

Will you allow vendors to sell a TCS\* food item? Yes  No

Will you allow cottage food vendors? Yes  No

Applicant's signature \_\_\_\_\_ Hours of operation \_\_\_\_\_

Permit Fee:	
Application Fee	\$28
Technology Fee	\$10
Permit Fee	\$100

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