FOOD SERVICE PERMIT RENEWAL APPLICATION

This form must be filled out for any business that wishes to operate a Food Service Establishment in Pike County, Missouri.
For additional questions, please call our office 573-324-2111.

PERMIT INFORMATION:

Annual Permit $100.00 (Valid from January 31st to January 31st the following year.)
Once your application has been approved, you will be sent an official Permit which must be put up in a location which is visible to your customers.

ESTABLISHMENT INFORMATION:

Name of Establishment: _____________________________________________________________________________________
Address of Establishment: ___________________________________________________________________________________
Billing Address (if different from above) ________________________________________________________________________
Email Address: _____________________________________________________________________________________________
Phone # of Establishment: (______) ______ - ____________   Fax # of Establishment: (______) ______ - ____________
Name of Manager: _________________________________________________________________________________________
Type of Ownership: ____ Individual    _____ Corporation    ____ Partnership   _____ Association
Hours of operation:
____________________________________________________________________________________________________________

I have enclosed payment in the amount of: $ ________________________
Make Check Payable/Mail Application to:
Pike County Health Department, Attn: Environmental Specialist
1 Healthcare Place, Bowling Green, MO 63334

Signature of Applicant: __________________________________________________________ Date: _____/_____/_______