



Health Permit Application

6800 Main Street, The Colony, Texas 75056
Phone 972-624-3158 \* Fax 972-624-2229

Permit #: \_\_\_\_\_ Date: \_\_\_\_\_
RFSM: [ ] Reg [ ] Not Reg [ ] Lic exp

Incomplete application and/or submittal will delay the review process.

THIS APPLICATION IS FOR HEALTH RELATED BUSINESSES ASSOCIATED WITH FOOD, BEVERAGE OR COMMERCIAL SWIMMING POOLS, SPAS OR SPLASH ZONES.

[ ] Health Permit [ ] Swimming Pool/Spa/Splash Zone

Establishment must notify the City of any changes to the information below within 10 business days to avoid enforcement actions.

Business Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Business Location

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address (if different from Business Location) (All correspondence will be sent to this address, for example: annual renewal notices, annual health permits)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Owner

Name \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Manager

Name \_\_\_\_\_ E-mail \_\_\_\_\_

Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Health Permit Information

Type of Permit [ ] New Establishment Proposed Opening Date \_\_\_\_\_

[ ] Annual Renewal [ ] Seasonal (schedule required) [ ] Change of Ownership/Pre-opening (\$75.00)

Type of Establishment [ ] Child Care (\$200) [ ] Seasonal (\$100 per 6 months) [ ] Schools [ ] Renewal Variance for Dogs on The Patio(\$150)

[ ] Grocery Store <8,000 sq. ft. GFA (\$350) [ ] Restaurant <2,000 sq. ft. GFA (\$350) [ ] Mobile Truck - [ ] Hot (\$200) [ ] Cold (\$150)

[ ] Grocery Store >8,000 sq. ft. GFA (\$550) [ ] Restaurant >2,000 sq. ft. GFA (\$550) [ ] Mobile Food Cart (\$250)

[ ] Warehouse/Distribution/Catering <2,000 sq. ft. GFA (\$350) [ ] Convenience Store (\$265) [ ] Limited Food Cart - [ ] Pre Packaged (\$100) [ ] Potentially Hazardous (\$150)

[ ] Warehouse/Distribution/Catering >2,000 sq. ft. GFA (\$550) [ ] Convenience Store with deli (\$320) [ ] Self-Service Markets (\$265)

Registration of Food Service Manager (RFSM)

A RFSM is required to be on duty at all times during operation. Failure to comply may result in enforcement actions by the Health Department.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Certified Food Manager # \_\_\_\_\_ Email \_\_\_\_\_

Pool/Spa/Splash Zone Information (A separate application must be submitted for each type.) Estimated Season Start Date \_\_\_\_\_

[ ] New [ ] Annual Renewal # Of Swimming Pools \_\_\_\_\_ # Of Spas \_\_\_\_\_ # Of Splash Zones \_\_\_\_\_
(\$150 first / \$100 each additional)

I herby recognize that the City of the Colony is a Regulatory Authority approved by the Department of State Health Services and agree to abide by the City's Code of Ordinances relating to Swimming Pools/Spas, Food and Food Establishments. I understand that if the application is filed, the permit fee will not be refunded, regardless of approval or denial of permit. I also understand that any permit granted as a result of the application may be suspended or revoked for failure to comply with the City's Code of Ordinances affecting public health.

Signature \_\_\_\_\_ Date \_\_\_\_\_