

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 Bi-City-County Health District

Application for a Permit to Operate a Food Establishment

Name of Establishment: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

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

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

Name of Owner or Corporation: _____

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

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

Establishment type: _____

Will any alcohol be sold or served? Yes No

Is a fully completed plan review guide being submitted with application? Yes No

Occupancy load: _____ Square Footage: _____

| Permit Fees: | Occupancy Loads: | If ≤50% of business is off-premise consumption: |
|---|------------------|---|
| Application Fee \$26 | 0 to 50 \$258 | 0-500 sq. ft. \$258 |
| | 51 to 150 \$361 | 501-3000 sq. ft. \$361 |
| Plan Review Fee \$88 | 151 to 250 \$464 | 3001-5000 sq. ft. \$464 |
| | 251 to 350 \$567 | 5001-15000 sq. ft. \$567 |
| Technology Fee \$10 | Over 350 \$670 | Over 15000 sq. ft. \$670 |
| Caterer, Mobile Food Unit (to include snow cone stands) | | \$258 |
| Schools and Daycare Facilities | | \$258 |
| TCS Vending Machine | | \$103/Unit |

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

Dec 15 2017