



FOOD ESTABLISHMENT PERMIT APPLICATION

CITY OF FRISCO
HEALTH & FOOD SAFETY
 6101 Frisco Square Blvd. 3rd Floor
 Frisco, TX 75034
 Main: 972.292.5304 Fax: 972.292.5313
 Email: health@friscotexas.gov
 Updated 05/19/16

Permit # _____

Application Date: _____

This form MUST be completed before Health Permit(s) are issued.

POSTAGE & HANDLING FEE (**\$5.00**) (Permit placard must be picked up at Development Services lobby, if fee not paid.)

TYPE OF BUSINESS: CAFETERIA (**\$500.00**) CATERING (**\$500.00**) COMMISSARY (**\$500.00**)
 CONCESSION (**\$50.00**) CONVENIENCE STORE (**\$250.00**) DAYCARE (**\$300.00**)
 GROCERY STORE (**\$650.00**) LIMITED FOOD (**\$100.00**) PRIVATE (**\$500.00**) KIOSK (**\$200.00**)
 RESTAURANT (**\$500.00**) SCHOOL/CITY (**\$0.00**) OTHER _____
 STADIUM KIOSK (**\$200.00**) STADIUM RESTAURANT (**\$400.00**) STADIUM CONCESSION (**\$200.00**)

****PLEASE INDICATE PREFERRED MAILING ADDRESS BY CHECKING NEXT TO BUSINESS NAME OR OWNER****

BUSINESS NAME: _____
 (NAME OF ESTABLISHMENT LOCATED IN FRISCO)
 CONTACT PERSON: _____
 STREET ADDRESS: _____ SUITE #/ KIOSK # _____
 (PHYSICAL LOCATION IN FRISCO)
 CITY: FRISCO STATE: TEXAS ZIP: _____ TELEPHONE: (_____) _____ - _____
 EMAIL ADDRESS: _____

OWNER (INDIVIDUAL OR CORPORATION): _____
 STREET ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
 TELEPHONE: (_____) _____ - _____ EMAIL ADDRESS: _____

PLEASE LIST CORPORATE OFFICER NAME, INCLUDING COMPLETE ADDRESS BELOW:

(1) CORPORATE OFFICER: _____
 STREET ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

All information in this application, is true to the best of the applicant's knowledge and belief. Applicant acknowledges the permit applied for is subject to revocation if the establishment fails to comply with applicable City ordinances or State laws. Permits are non-transferable and subject to late fee when received after expiration date. Permits are non-transferable and subject to late fee if received after expiration date.

Applicant Name (printed) _____ Signature _____ Date _____