

Mobile Food Service Health Permit Application

Environmental Health Services Division

Davis County Health Department

99 South Main Street

P.O. Box 618

Farmington, UT 84025-0618

(801) 451-3296 (801) 444-2300 ext. 3296

TDD: (801) 451-3228 Fax: (801) 451-3122

Establishment's Name _____

Establishment Phone # _____

Truck # _____

License # _____

Route # _____

Invoice Address

Name _____

Street/P.O. Box _____

City _____

State _____

Zip _____

Mailing Address

Name _____

Street/P.O. Box _____

City _____

State _____

Zip _____

Owner Information

Corporation Name _____

Name _____

Phone Number _____

Street/P.O. Box _____

City _____

State _____

Zip _____

Individual Partnership L.L.C. Corporation _____

Hours of Operation:

Requested permit will be issued only after a satisfactory pre-opening inspection has been conducted and the required permit fee has been received. Operating a food service establishment prior to permit issuance, other than an authorized renewal procedure, is a Class B Misdemeanor. Applicant agrees that maintenance of a health permit is predicated on compliance with the Davis County Food Service Sanitation Rules and Regulations. This permit is revocable for non-compliance.

Date: _____

Signature of Applicant: _____

Title: _____

Type of Establishment _____ Classification _____ Seating _____ Bays _____ Sq. Footage _____

Establishment Codes _____ Inspection Frequency _____ Permit # _____ Date Issued _____

Date Paid: _____ Receipt No. _____ Amount Paid: _____