Brownwood/Brown County Health Department
510 East Lee Street – P.O. Box 1389
Brownwood, TX 76801
(325) 646-0554

Food Service Permit Application

Application is hereby made to permit a Food Service Establishment with Brown County in accordance with ordinances or said county.

It is hereby stipulated and agreed by the undersigned, that a permit fee of **$80.00** per year payable to the Brownwood/Brown County Health Department shall accompany the application.

In consideration of the issuance of such permit, the applicant understands that said permit can be suspended or revoked for noncompliance of County ordinances. Permit shall not be transferrable from person to person or from one location to another location.

Name of Establishment:

Address:_____ Phone_____

Name of Owner:_____

Address of Owner:_____

Manager:_____

Type of Establishment:_____
(ex: restaurant, retail, temporary)

Date Inspection desired_____ Date of opening_____

PERMIT NUMBER_____	**SUSPENDED_____ REVOKED_____**
DATE ISSUED:_____	**DATE:_____**