



Application for Food Handler's License
(Please Print Clearly)

Fee: \$65.00

Expires December 31st

IDENTIFICATION			
Owner Information		Establishment Information	
<small>(Complete this section only if different from establishment information)</small>			
Name of owner(s), Corporation or Registered Agent		Establishment Trading Name	
Number and Street	County	Number and Street	County
Municipality	State	Manager	Telephone Number
Zip Code	Telephone Number	Establishment State License No. (if applicable)	

Items To Be Prepared, Sold, Distributed:

If exemption is claimed, check here _____

Signed _____

Title _____

(TO BE COMPLETED BY BOROUGH OFFICIAL)

Date Received _____
 Sanitary Inspection Report Submitted with application _____
 Approved _____
 Disapproved _____

Payment _____
 Deposit Date _____
 License # Issued _____
 Date of Issuance _____