

**ELKHART COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES DIVISION  
4230 ELKHART ROAD, GOSHEN, IN 46526 PH. 574-875-3391**

**\*\*APPLICATION FOR 2011 ELKHART COUNTY FOOD SERVICE LICENSING PAGE 1\*\***

**\*Please complete all sections\***

NAME OF ESTABLISHMENT \_\_\_\_\_ RENEWAL   
 NEW   
 CHANGE OF OWNER

ESTABLISHMENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

TOWNSHIP \_\_\_\_\_ ESTABLISHMENT PHONE ( ) \_\_\_\_\_

*(If owner is a corporation or partnership Page 2 of application must be completed) Check here when completed*

NAME OF OWNER \_\_\_\_\_ OWNER'S PHONE ( ) \_\_\_\_\_

OWNER'S ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

OWNER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

WATER SUPPLY \_\_\_\_\_ PUBLIC \_\_\_\_\_ PRIVATE (WELL) \_\_\_\_\_  
 WASTE WATER DISPOSAL \_\_\_\_\_ MUNICIPAL \_\_\_\_\_ ON-SITE SYSTEM (SEPTIC SYSTEM) \_\_\_\_\_

Certified food handler \_\_\_\_\_ Type of Certification \_\_\_\_\_ Certificate # \_\_\_\_\_  
Experior, Serve Safe, National Registry

**PLEASE LIST HOURS OF OPERATION**

	Months (ex: Jan-May)	Days (ex: Mon-Fri)	Hours (ex: 8 am-5pm)
If your operation has different days/hours by season please list them separately. For example, list the Summer Months, Days and Hours on the top line and the Winter schedule on the bottom line.	_____	_____	_____
	_____	_____	_____

**PLEASE INDICATE TYPE OF OPERATION:** (011) FULL SERVICE \_\_\_\_\_ (022)LIMITED SERVICE \_\_\_\_\_

(016) MOBILE W/COMMISSARY IN COUNTY _____	NUMBER OF UNITS _____
(017) MOBILE W/COMMISSARY OUT OF COUNTY _____	NUMBER OF UNITS _____
(018) VENDING W/FOOD PREP _____	NUMBER OF VENDING MACHINES _____
(019)VENDING W/WAREHOUSE ONLY _____	NUMBER OF VENDING MACHINES _____
(020) VENDING W/OUT OF COUNTY COMMISSARY _____	NUMBER OF VENDING MACHINES _____

**FEES:** Full Service (food services, commissaries with food prep, supermarkets & Convenience w/food service), \$150.00 April 1 to March 31  
 Limited Food Service (no food prep, pre-packaged) , \$85.00 April 1 to March 31  
 Mobile Units (must have licensed commissary) \$75.00 for 1st unit, and \$40.00 for each additional unit.  
 Permit for Vending Commissary (Warehouse), \$85.00  
 Vending Permit (1-30 Machines), \$75.00 Vending Permit (51-100 Machines), \$165.00  
 Vending Permit (31-50 Machines), \$115.00 Vending Permit (101 + Machines), \$225.00  
 Vending Involving On-Site Preparation, \$150.00

**PLEASE \*\*\*\* MAKE ALL CHECKS PAYABLE TO ELKHART COUNTY TREASURER**

**FEES ARE NOT REFUNDABLE.** FEES FOR RELIGIOUS, CHARITABLE OR EDUCATIONAL ORGANIZATIONS ARE ONE-HALF THE ABOVE FEES IDENTIFIED FOR EACH CATEGORY AND MUST BE ACCOMPANIED BY A COMPLETED APPLICATION AND A COPY OF YOUR PROOF OF STATE INCOME TAX EXEMPTION.

NOT-FOR-PROFIT ORGANIZATION – STATE INCOME TAX EXEMPTION CERTIFICATE ENCLOSED

**PLEASE NOTE: AN APPROVED FOOD SERVICE LICENSE MUST BE RECEIVED PRIOR TO OPENING ANY TYPE OF FOOD SERVICE.** 2011FDAPP