

# Application for License to Conduct a (check only one)

- ☒ Food Service Operation  
☐ Retail Food Establishment

## Instructions:

1. Complete the application section. (Make any corrections if necessary.)
2. Sign and ate the application
3. Make a check or money order payable to: **ALLEN COUNTY HEALTH DEPARTMENT**
4. Return check and signed application by\* to:  
**Allen County Health Department**  
**219 E MARKET STREET, P.O. BOX 1503**  
**LIMA OHIO 45801-1503**

\*There is a mandatory penalty fee of 25% of the renewal fee for operating a food service operation or retail food establishment after the deadline (Chapter 3717 of the Ohio Revised Code).

Before a license application can be processed the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in not issuing a license. This action is governed by Ohio Revised Code 3717.

Name of Facility		Name of License Holder	
Address		E-mail	
City		State	ZIP
Phone #	Fax #		Check if Applicable <input type="checkbox"/> Catering <input type="checkbox"/> Seasonal
Name of individual certified in food protection (if an) and their certificate number (use back for additional names)			

## Mailing address for annual renewal if different than above:

Name of parent company or owner		Phone #	
Address		E mail	
City		State	ZIP
<i>I hereby certify that I am the license holder ,or the authorized representative, of the food service operation or retail food establishment indicated above:</i>			
Signature		Date	

## Licensors to complete below

Category <b>MOBILE</b>			
License fee <b>\$64.00</b>	+ Late fee	+ State amount <b>\$28.00</b>	= Total amount due <b>\$92.00</b>

Application approved for license as required by Chapter 3717 of the Ohio Revised Code.

By	Date	Audit no.	License no.
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