



Town of Flower Mound Environmental Services
 Mailing Address: 2121 Cross Timbers Road, Flower Mound, TX 75028
 Physical Address: 1001 Cross Timbers Road, Suite 2330, Flower Mound, TX 75028
 Telephone: 972-874-6340 Fax: 972-874-6473 Website: www.flower-mound.com

RETAIL FOOD ESTABLISHMENT PERMIT APPLICATION

Permit Fee: \$300.00*

No permit will be processed if application is not complete, not legible, and/or required documentation or fee is incorrect and/or missing

Permit fees are non-refundable

Print or type all information legibly

FOOD ESTABLISHMENT INFORMATION

Name of Establishment: _____

Address of Establishment: _____

Manager of Establishment: _____

Phone: _____ FAX: _____ E-mail: _____
 (Required)

OWNERSHIP INFORMATION

TEXAS STATE SALES TAX NUMBER (Required): _____

Check one: Proprietorship Corporation[†] Partnership (list all partner's names, addresses, driver's license on back of application)

[†] For Corporation, include name of Registered Agent in Texas

* For non-profit, include tax exemption paperwork

Name of Proprietorship, Corporation, or Partnership: _____

Address: _____
 Street City State Zip

Mailing address for renewal, permit mailing, and information if different from above:

Street City State Zip

Name of Contact Person: _____ Title: _____

Phone: _____ FAX: _____ E-mail: _____
 (Required)

I understand any permit granted from this application may be revoked for cause. Failure to comply with the Town of Flower Mound rules and regulations, as well as any notices for correction of violations affecting public health and sanitation, and/or any false or misleading information provided on this application, shall be deemed cause for revocation of the Food Establishment Permit and **CLOSURE** of the establishment.

_____ Print Name Signature Position/Title Date

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 For Environmental Health Services office use below this line

(Rev 10/2011)

_____ Approved by

_____ Date