

MOBILE APPLICATION
Whitley County Health Department
220 W. VanBuren Street, Suite 106
Columbia City, Indiana 46725
Phone: 260-248-3121 – Fax 260-248-3129

Name of Establishment:
Address:
Name of Owner:
Address:
E-Mail Address:
Phone # Cell Phone #
Manager of Establishment:

ALL PERMITS MUST BE ACQUIRED PRIOR TO OPENING ANY FOOD CONCESSION

ANNUAL MOBILE
Fee \$100.00 - Date of Issue _____

List of Events:

Date of Events:

Menu:

Name, address, and phone number of Commissary:

-
- Note: Please include commissary agreement
-

Name of Certified Food Safety Handler
Which Program Attended _____
Date of Certification:

Signed: _____ Date: _____

Signed: _____ Date: _____

BRING OR SEND THIS APPLICATION TO THE HEALTH DEPT. TO RECEIVE PERMIT
ALL PERMITS MUST BE ACQUIRED PRIOR TO OPENING ANY FOOD CONCESSION