

1. Check one:	2. Check one:
<input type="checkbox"/> Renewal License Application <input type="checkbox"/> New Owner <input type="checkbox"/> New Est. or New Location	<input type="checkbox"/> Fixed Establishment <input type="checkbox"/> Mobile <input type="checkbox"/> Mobile Commissary <input type="checkbox"/> Special Transitory Food Unit (STFU)

## FOOD SERVICE LICENSE APPLICATION

**Michigan Department of Agriculture & Rural Development**  
 As required by Act 92, Public Acts of 2000, as amended

For license year ending:

**April 30, 2021**

License No.

L2000ID

Mailing Address (Number & Street, Box or Route)

**5. Applicant Information - MUST BE COMPLETED**  
 I certify that this information is accurate

Signature <b>X</b>	Date
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Printed name of owner or authorized agent

**3. Business & Owner Information**

Name of Establishment or Business (type or print)

Establishment Address (Number & Street, Box or Route)

City	Zip	County of Location
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Title	E-Mail
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Establishment Phone No.	Home Phone No.
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Fax No.	Emergency Phone No.
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Name of Owner (First, MI, Last) (Individual or Corporation)

Owner's Address

City	State	Zip Code
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**6. Renewal Due Date: March 31, 2020**  
 Amount Due: \$ \_\_\_\_\_

The following fees will be applied for submission after March 31st:

April 1, 2020 **\$100** Late Application fee.

May 1, 2020 **\$150** License Expiration fee.

**Mail application and fee payable to:**

HDNW  
 220 WEST GARFIELD  
 CHARLEVOIX, MI 49720

**4. Mobile Establishment Licensing Information**

Decal No. (Health Dept. Issued)	VIN No.
Vehicle Make	License Plate No. & State
Business Name on Vehicle	Commissary License No.

**THIS AREA FOR LOCAL HEALTH DEPARTMENT (LHD) USE**  
 Delete License

Fee Exempt State:	Yes	No	
Fee Exempt Local:	Yes	No	___ License Limitation
Fee Exempt Veteran:	Yes	No	STFU Last 2 Inspection Dates: Date: _____ Date: _____

LHD: Retain copy of Act 359 Veteran's License

Date Stamp (LHD Use Only)







License No.	Seasonal Establishment (check if seasonal)
Amount Received	LHD No. Civil Division
	Payment ID Check No.
Signature of Health Department Representative	Date Approved

# Michigan Department of Agriculture & Rural Development

## Food Service License Application

### Instructions to Applicant

#### Renewal Application

- A. **Review** **Sections 1-4** **for accuracy.** Please review the pre-printed application and make any necessary corrections. Please pay special attention to the facility name and address.
- a. **DO NOT USE THE RENEWAL FORM IF ONE OF THE FOLLOWING APPLY:**
-   Change of ownership
  -   Change in the physical location of establishment
  -   Change of license type
- b. If one of these situations apply, fill out a new license application. To obtain a new "Food Service License Application", contact your local health department or download the form at: [www.nwhealth.org](http://www.nwhealth.org)
- c. The pre-printed renewal form should be returned to the local health department along with the new application.
- B. **Complete** **Section 5.** **Be sure to sign the application.**
- C. **Include license fee** amount shown in **Section 6** Make checks payable to your local health department.
- D. **Special Transitory Food Unit (STFU) renewal applications.** If you are a Special Transitory Food Unit (STFU) as identified in box #2 on the application, you must include a copy of the two paid inspections, along with your application form and check.
- E. **Mail to your local health department before March 31, 2020 to avoid a late fee.**

#### New Application

- A. Complete all applicable parts of **Sections 1-5.** **Be sure to sign the application.**
- B. Contact your local health department for fee and mailing address if not shown in **Section 6.** Make checks payable to your local health department.
- C. Return completed application form along with the fee to your local health department.

#### Definitions

<p><b>Special Transitory Food Unit (STFU):</b> Means a temporary food service establishment that operates throughout the state without the 14 day limit.</p>	<p><b>Mobile Food Service Establishment:</b> Means a food service establishment operating from a vehicle, trailer or watercraft which is not fully equipped for full food service and, therefore, must return to a licensed commissary at least once every 24 hours for servicing and maintenance.</p>
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