

APPLICATION FOR RETAIL FOOD ESTABLISHMENT LICENSE

Return application and payment to:

A.D.L.M. COUNTIES ENVIRONMENTAL PUBLIC
 12307 HWY 5 -
 PO BOX 399
 MORAVIA, IA 52571-0399

Phone : (641)724-3511

License # : _____ Exp Date : _____

Date Of Application : _____

Type of Application : NEW RENEWAL

If new application, business opening date : _____

Has ownership changed since last license issued ? Yes No

If yes : Previous Owner : _____

Business Name : _____

Last License Number : _____

WATER SOURCE (check one) Public water supply

Private Well

Name of Business : _____

Owner's Name : _____ Phone : _____

Physical Address : _____ County : _____

City : _____ State : _____ Zip : _____

Mailing address for all correspondence if different than above :

Street or Route : _____ Phone : _____

City : _____ State : _____ Zip : _____

Person-in-Charge : _____ Title : _____ Phone : _____

Ownership structure: Individual : Partnership*: Corporation*:

*(Complete next section for partners or corporate officers)

Establishment Type

Name : _____ Title : _____

Address : _____

City : _____ State : _____ Zip : _____

Name : _____ Title : _____

Address : _____

City : _____ State : _____ Zip : _____

Please check appropriate box

Other food retailer (00)

Super market/grocery store (31)

Convenience store (32)

Candy maker (33)

Fruit and vegetable market (42)

Bakery (82)

License Fee Structure

All license fees are based on total gross sales of food and drink covered by that particular license. **Schedule B** is for Retail Food Establishments that also have a Food Service Establishment license for the same physical address as on this application. Retail Food Establishments that **do not** have a Food Service Establishment license for the same physical address must pay a license fee based on **Schedule A**. **If highest fee is not selected, Tax or Certified Statement of total gross sales is required.**

Schedule A	Schedule B
For Retail Food Establishment license holders that do not have a Food Service Establishment license for the same physical address. (Please check appropriate box below).	For Establishments with both a Retail Food Establishment and a Food Service Establishment license for the same physical address. To qualify for Schedule B, you must provide your Food Service Establishment license number. : _____
<input type="checkbox"/> \$40.50 FE-NO FOOD SERVICE \$1 TO \$10,000 <input type="checkbox"/> \$101.25 FE-NO FOOD SERVICE \$10,001 TO \$250,000 <input type="checkbox"/> \$155.25 FE-NO FOOD SERVICE \$250,001 TO \$500,000 <input type="checkbox"/> \$202.50 FE-NO FOOD SERVICE \$500,001 TO \$750,000 <input type="checkbox"/> \$303.75 FE-NO FOOD SERVICE \$750,001 + <input type="checkbox"/> \$0.00 FE-EXEMPT	<input type="checkbox"/> \$30.38 FE-WITH FOOD SERVICE \$1 TO \$10,000 <input type="checkbox"/> \$75.94 FE-WITH FOOD SERVICE \$10,001 TO \$250,000 <input type="checkbox"/> \$116.44 FE-WITH FOOD SVC \$250,001 TO \$500,000 <input type="checkbox"/> \$151.88 FE-WITH FOOD SVC \$500,001 TO \$750,000 <input type="checkbox"/> \$227.81 FE-WITH FOOD SERVICE \$750,001 +

Any change in Ownership Requires a New License. Licenses are **Not** Transferable.

Make Check or Money Order Payable to :

A.D.L.M. COUNTIES ENVIRONMENTAL PUBLIC

Signature of Applicant : _____

Title of Applicant : _____ Date : _____

FOR OFFICE USE ONLY

CK # : _____

\$: _____

CK Date : _____