

# FANNIN COUNTY HEALTH DEPARTMENT

101 E. Sam Rayburn Drive Ste 101; Bonham, TX 75418; Tel: 903-583-7455/Fax 903-583-7811

## FOOD HANDLER PERMIT REGISTRATION APPLICATION

**INSTRUCTIONS:** (1) Complete all information below (2) Enclose a copy of the food handler certificate (3) **Submit \$15.00 fee**

I have received a certificate from a food handler training course that is accredited by the Texas Department of State Health Services, Food Handler Program. I have enclosed a copy. Please register my certificate with the Fannin County Health Department as required by law.

### FOOD HANDLER

Name: \_\_\_\_\_  
(Last) (First) (M)

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver License No: \_\_\_\_\_

Signature: \_\_\_\_\_

### ESTABLISHMENT

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

General Manager \_\_\_\_\_ E-mail \_\_\_\_\_

### ACCREDITED FOOD HANDLER TRAINING COURSE

Name: \_\_\_\_\_

Certificate No: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

#### HEALTH DEPARTMENT USE ONLY

RECEIPT NO: \_\_\_\_\_ HANDLER PERMIT EXPIRES: \_\_\_\_\_

DATE PAID: \_\_\_\_\_ PERMIT POSTED: \_\_\_\_\_

REGISTRATION FEE: \$15.00 FCHD CERTIFICATE NO.: \_\_\_\_\_

INITIALS: \_\_\_\_\_ HANDLER PERMITS MAILED / DELIVERED: \_\_\_\_\_