

2023 Food Permit Application
Noble County Health Department
2090 N. State Road 9, Suite C
Albion, IN 46701
Phone: 260-636-2191

Please complete all sections

Select one of the following:

☐ Annual Food Service ☐ Food Truck ☐ Temporary/Mobile ☐ Non-Profit ☐ Bed & Breakfast
(Annual)

Please complete the information requested and return with the required fee payable to the Noble County Health Department. The fee for the annual permit is \$100.00. A temporary/mobile food permit is \$25.00 for the first day, and \$10/day for each subsequent day for the same event. Temporary/Mobile food permits need to be returned at least 14 days prior to the event. **Note: Temporary/Mobile food permits purchased after the required date will be charged a \$50.00 late fee. Annual permits will be charged a \$100.00 late fee if received after December 31, 2022.** Permits are NOT transferable and must be displayed in accordance to the Noble County Retail Food Ordinance. **PLEASE NOTE: An approved food permit must be received prior to OPENING ANY TYPE of FOOD SERVICE.**

Name of Establishment _____ Renew ☐ New ☐

Establishment Address _____ City _____ State _____ Zip _____

Mailing Address _____ City _____ State _____ Zip _____

E-Mail Address _____ Establishment Phone # _____

Name of Owner _____ Owner's Phone # () _____

Owner's Address _____ City _____ State _____ Zip _____

Owner's Signature _____ Date _____

Water Supply _____ Public _____ Private (well) _____

Waste Water Disposal _____ Municipal _____ On-Site System (Septic System) _____

Certified Food Handler _____ Expiration Date _____ Certificate # _____

Please list hours of operation:

Place/Locations	Date	Hours (ex: 8am-5pm)

Please * Make all checks payable to the NOBLE COUNTY HEALTH DEPARTMENT**
Applications are due by December 31, 2022 to avoid a \$100.00 late fee

Fees are **NOT REFUNDABLE!**

☐ Not-For-Profit Organization – A copy of your State Income Tax Exemption Certificate must be accompanied by a completed application. **There is NO charge for Non-Profit Organizations but an application needs to be filled out and returned.**

Sign _____

Date _____

Receipt #: _____

Permit Mailed: _____