

## Microenterprise Home Kitchen Initial Permit Application

Business Name:	
Owner Name:	
Physical Address:	
Mailing Address:	
	Email:
Checklist for items needed with permit application:	
<ul> <li>Proper certificates: Food Safety Manager, Food Handlers</li> <li>Operation plan, including:</li> <li>Menu</li> </ul>	
<ul> <li>Food Preparation, Handling, &amp; Storage</li> <li>Procedures/methods for cleaning</li> <li>Disposal of refuse</li> <li>Plan for TCS foods</li> </ul>	
* I hereby consent to allow CUPHD staff to enter the premises where food is prepared, cooked, or stored for the Microenterprise Home Kitchen.	
Applicant's Signature:	Date:
<ul> <li>Permits are valid for the calendar year, renewable on January 1<sup>st</sup> of each year.</li> <li>Permits are non-transferable.</li> </ul>	
Office Use Only	
Permit Fee: \$350 Amount	Paid: Permit #:
Date Received: Rec	eived by: Receipt #:
Payment Method: □ Cash □ Check #: □ Credit Card	
LEHS Approval:	Date: