



Bernalillo County
OFFICE OF ENVIRONMENTAL HEALTH
 111 UNION SQUARE SE, SUITE 300
 ALBUQUERQUE, NEW MEXICO 87102
 (505) 314-0310 • FAX (505) 314-0470

**FOOD ESTABLISHMENT
 PERMIT APPLICATION**

Date Received	_____
Check No.	_____
Receipt No.	_____
Permit No.	_____

Fill in applicable blanks and mail original with a check or money order for the amount due, payable to Bernalillo County Office of Environmental Health at 111 Union Square SE, Suite 300, Albuquerque, New Mexico 87102.

ESTABLISHMENT NAME

SITE ADDRESS, CITY, STATE, ZIP

OWNER	PHONE	FAX
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ESTABLISHMENT MAILING ADDRESS, CITY, STATE, ZIP

CONTACT PERSON	PHONE	FAX
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COMPANY NAME	PHONE	FAX
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COMPANY ADDRESS, CITY, STATE, ZIP (if different from above mailing address)

TYPE OF PERMIT <input type="checkbox"/> New Food Permit <input type="checkbox"/> Renewal Food Permit	<input type="checkbox"/> New Non-Profit Food Permit Non Profit ID No. _____	<input type="checkbox"/> Renewal Non-Profit Food Permit Non Profit ID No. _____
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TYPE OF FOOD SERVICE ESTABLISHMENT (check all that apply)

<input type="checkbox"/> Food Service Establishment <input type="checkbox"/> Bakery <input type="checkbox"/> Bar/Tavern <input type="checkbox"/> Care Facility <input type="checkbox"/> Child Care <input type="checkbox"/> Adult Care <input type="checkbox"/> Caterer <input type="checkbox"/> Commissary <input type="checkbox"/> Convenience Store <input type="checkbox"/> Delicatessen <input type="checkbox"/> Distributor/Warehouse <input type="checkbox"/> Grocery <input type="checkbox"/> Institution (school, etc.) <input type="checkbox"/> Filtered Water	<input type="checkbox"/> Limited Menu <input type="checkbox"/> Meal Site <input type="checkbox"/> Meat Market <input type="checkbox"/> Mobile Vendor (plate no. _____) <input type="checkbox"/> Fully self-contained <input type="checkbox"/> Non self contained <input type="checkbox"/> Produce/ Vegetable <input type="checkbox"/> Push Cart <input type="checkbox"/> Restaurant <input type="checkbox"/> Seafood <input type="checkbox"/> Seasonal <input type="checkbox"/> Snack Bar <input type="checkbox"/> Other: _____	<input type="checkbox"/> Food Processing Establishment <input type="checkbox"/> Bakery <input type="checkbox"/> Beverage <input type="checkbox"/> Bottled Water <input type="checkbox"/> Distributor/Warehouse <input type="checkbox"/> Dry Food <input type="checkbox"/> Jerky <input type="checkbox"/> Meat (butcher) <input type="checkbox"/> Refrigerated/Frozen Food <input type="checkbox"/> Seafood <input type="checkbox"/> Shelf Stable Food <input type="checkbox"/> Shellfish <input type="checkbox"/> Other: _____
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BUSINESS LICENSE (Do you currently have a Bernalillo County Business License?)

<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Pending	Business License Number: _____	Expires: _____
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