

Cape Girardeau County Public Health Center

Environmental Services 1121 Linden Street, P.O. Box 1839 Cape Girardeau, MO 63702-1839 Tel: 573-335-7846

Prevent. Promote. Protect.

PERMIT APPLICATION FOR MOBILE FOOD STANDS

DATE:	AMOUNT DUE \$	-
the provisions of Ordinan Girardeau County Commi	de for a permit to operate. By this application it is agreed that the establishment will conce #08-02 (also known as the Cape Girardeau County Food Ordinance) as adopted by tission. It is further agreed that said Mobile Food Stand will be open to inspection by aut deau County Public Health Center.	he Cape
Please Type or Print Lega	ibly	
Type of Food Stand (cho	eck one) MOBILEX	
FOOD STAND NAME		
Street Location		
City, State, Zip		
OWNER'S NAME		
MAILING ADDRESS		
CITY, STATE, ZIP		•
Phone		
CORPORATE Name	- <u></u> -	
Mailing Address		_
City, State, Zip		_
Phone		_
X		
	Signature of Person Completing Application	
Official Use Oak		
Official Use Only		
Amount Paid \$	Date Received	

Environmental Public Health Specialist _____

or Representative