Lafayette County Health Department
547 South 13 Highway · Lexington, Missouri 64067-1437
(660) 259-4371 · Fax (660) 259-6250
Web page: www.lafayettecountyhealth.org

FOOD SERVICE PERMIT RENEWAL APPLICATION 2019
RETURN THIS FORM WITH PAYMENT

☐ Annual Renewal (due 12/31/17) ☐ New Establishment – proposed opening date ________
☐ Location Change ☐ Re-opening/Remodeling ☐ Change of Ownership

*Owner of Establishment ☐ Individual/Sole Proprietor ☐ LLP ☐ LLC ☐ Corporation

BillingAddress
☐ Send permit applications to corporate rather than local establishment

*Establishment Name ________________________________________________________________

*Establishment Address: _____________________________________________________________

*Mailing Address (if different than above) ______________________________________________

Phone __________ Fax ___________ E-mail ________________________________

Manager/Person-In-Charge __________________________________________________________

Number of Managers/Supervisors_________ Number of Employees_________

Days & Hours of Operation: ___________________________________________________________

I agree to comply with all operation regulations for a food service that are enforced by the Lafayette
County Health Department.

*Signature________________________________________ Title_______________________________

Date___________
Must be completed fully and have valid signature for approval

Permit valid for 1 year, must be renewed annually, upon change of ownership, or re-opening after major
remodeling.

( O V ER)
PERMIT FEES

Permit fees are based on a worksheet formula to determine Public Health Priority (PHP). The fee amount is based on the number of routine inspections and a potential re-inspection determined by PHP. PHP is determined by the complexity of the food operation and the inspection history.

Additional fees will be levied if:

- repeated violations requiring more than 1 re-inspection after a failed initial inspection have occurred.
- permit fees are received after due date.
- establishment has been late with renewals previously – certified mail fee

Make check payable to Lafayette County Health Department

Total Fee $ __________

Remit completed and signed application along with check or money order to:
Lafayette County Health Dept.  547 S. Bus. 13 Hwy. Lexington, MO 64067

RENEWALS DUE DECEMBER 31, 2017. NEW OR MODIFIED PERMITS DUE BEFORE OPENING/RE-OPENING. FAILURE TO OBTAIN A PERMIT WILL INCUR ADDITIONAL FEES AND COULD RESULT IN THE CLOSING OF YOUR ESTABLISHMENT.

<table>
<thead>
<tr>
<th>For Office Use Only</th>
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<tr>
<td>Current Establishment Database Name____________________________________________________</td>
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<tbody>
<tr>
<td>X</td>
<td>High Public Health Priority Establishment</td>
<td>$159</td>
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<tr>
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<td>Medium Public Health Priority Establishment</td>
<td>$106</td>
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<td>Low Public Health Priority Establishment</td>
<td>$53</td>
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<tr>
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<td>Certified Mail Fee for renewal application ( permit fees have been chronically late )</td>
<td>$6</td>
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<td>Penalty Fee</td>
<td>$75</td>
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<td>Re-inspection visits beyond the first re-inspection required due to non-compliance</td>
<td>$53/hour</td>
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<th>Application Approved</th>
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<tr>
<td>Signature: EPHS/Designee ____________ Date ____________</td>
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<td>Payment Received</td>
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REVISED 8/2016