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| Facility Name: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Facility Address: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Town: | | |  | | | | | | | | | | | | | | State: | | | |  | | | | | | | | Zip: |  |
| Owner of Business: | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Town: | | |  | | | | | | | | | | | | | | State: | | | |  | | | | | | | | Zip: |  |
| Facility Phone Number: | | | | | | | | |  | | | | | | Owner’s Phone Number: | | | | | | | | | |  | | | | | |
| Business/Owner E-mail Address: | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | | | |
| Mobile Unit Information (If applicable): | | | | | | | | | | | | |
| State: | |  | | | | | Tag #: | | |  | | | | | | | | Vin#: | | | |  | | | | | | | | |
| Seating Capacity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Source of Food (Name supplier, Grocery, Restaurant, Caterer or Commercial Distributor): | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Water Supply: | | | | | Private | | | | | | Number of wells: | | |  | |  | | | Sewage Disposal: | | | | | | | Public | | | | |
|  | | | | | Public - Community | | | | | | | | | | | | | | |  | | | | | | On-Site | | | | |
|  | | | | | Public Non-Community | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Signature of Applicant: | | | | | | | | |  | | | | | | | | | | | | | | Agent  Owner | Date: | | | |  | | |

**PLEASE PRINT OR TYPE AND RETURN**

Application is hereby made for License to **Operate an “Excluded Food Service Organization”** in accordance with COMAR 10.15.03 Regulations Governing Food Service Facilities, Health-General, Section 21-306. An “**Excluded Food Service Organization**” means a bona fide nonprofit fraternal, civic, war veterans’, religious, or charitable organization or corporation that does not serve food to the public more often than 4 days per week, except that once a year an organization may serve food to the public for up to 14 consecutive days; or a volunteer fire company that does not serve food to the public more often than 4 days per week except that once a year a volunteer fire company may serve food to the public for up to 30 consecutive days.

**PLEASE PRINT OR TYPE AND RETURN**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Paid: $ | | EXEMPT | | | | |  |
| Rcvd: |  | | | | | |  |
| Receipt #: | | | N/A | | | |  |
| W/C: |  | | | N/A | |  |  |
|  | | | | |  | |  |

**DO NOT FILL IN BELOW THIS LINE – FOR OFFICE USE ONLY**

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| License Number: | | | | 007- |  | | - | |  | - |  |  | Priority: | | High | | |
| Date Issued: | |  | | | | | | | | | |  | | | | Medium | |
| Valid Date: | |  | | | | | | | | | |  | | | | Low | |
| Expiration Date: | | |  | | | | | | | | |  | | | | | |
| Application Approved By: | | | | | |  | | | | | | | | Date: | | |  |
| ID #: |  | | | | | | |  | | | | | | | | | |

Rev. 06/27/2019