



**Commonwealth of Virginia
Piedmont Health District
Environmental Health Division**

APPLICATION FOR A DEPARTMENT OF HEALTH FOOD ESTABLISHMENT PERMIT

Type of Application: New* Renewal Change of Ownership*

New and Change of Ownership may require a plan review fee and plan review packet completion. Please complete all parts of the application, it is necessary to process your application and payment correctly and timely.

Applicant's/Legal owner name: _____ Telephone: (____) _____

Billing address: _____

E-mail address: _____

Name of establishment: _____ Telephone: (____) _____

Establishment mailing address/location: _____

Establishment owner is a/an: Association Corporation Individual Partnership Other: _____

Names/titles/addresses of persons comprising the legal ownership. (Attach list if necessary.)

Name/title/address/telephone number of person who is the immediate supervisor of the person directly responsible for the establishment (i.e., zone, district or regional supervisor): _____

Is the establishment: stationary/ permanent, mobile or push cart; B & B food service
 summer camp/ campground food service catering only hotel breakfast area

Days of operations: (Circle all) S M T W T F S Hours of operation: _____

Seasonal or annual operation: If seasonal which months does it operate: (circle all that apply)
Jan Feb Mar Apr May Jun Jul Aug Sept Oct Nov Dec

Seating capacity: _____ inside seating or _____ outside seating

Is the food establishment: smoking or non-smoking Outside smoking Area

Certified food manger on staff: Yes No (Required as of July 1, 2018)

If Yes, Name of certified manager: _____

Date of certification expiration: _____

Certificate number: _____ Copy of certificate provided: Yes No

If No, Date planned to obtain the required certification: _____



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Please answer the following questions regarding the type of food service you provide at your food facility.

Does the establishment: (Please circle all correct responses below to all questions)

- 1. Prepare, offer for sale, or serve TCS (time/temperature control for safety) food (this does not mean you make bad food, it means if you prepare or serve foods that could be hazardous if not handled correctly): Example raw ground beef to make hamburgers, vegetables cooked and cooled to reheat for next day service
a. Only to order upon a consumer's request (prepared only when it is ordered). Y or N
b. In advance quantities (prepared ahead and hot held or cold held). Y or N
c. Using time as the public health control. Y or N
2. Prepare TCS (time/ temperature control for safety) food in advance using a food preparation method that involves two or more steps which may include combining TCS food ingredients, cooking, cooling, reheating, hot or cold holding, freezing, or thawing (Does the facility use any of the method listed when preparing foods). Y or N
3. Prepares food as specified under (2) for delivery to and consumption of at a location off premises of the food establishment where it is prepared. Y or N or N/A
4. Prepares food as specified under (2) of this section for service to a highly susceptible population. Y or N or N/A
5. Does not prepare, but offers for sale only prepackaged food that is not TCS. Y or N or N/A
6. Prepares food that is not a TCS food. Y or N or N/A

Water Supply: Public Private
Sewage: Public Private - Type:

New Original well and septic permit owner's name:

I/we attest to the accuracy of the information provided, affirm to comply with the Commonwealth of Virginia Food Regulations and allow the regulatory authority access to the establishment at any reasonable time to inspect, conduct test, or collect samples as required.

Print Name:

Signature: Date: / /

Title:

Foodservice Permit Fee \$40.00 (Restaurants, Mobile units, summer camp, Hotel breakfast area, B&B food, Campground food service and catering food service)

Payments: Make checks payable to Local Health Department below. Credit card payments are accepted by calling Local Health Department telephone at the number listed below:

Amelia County Health Department
16320 Church Street, Amelia, VA 23002
Phone: (804) 561-2711
Fax: (804) 561-2712

Cumberland County & Prince Edward County Health Department
111 South Main Street, Ground Floor, Farmville, VA 23901
Phone: (434) 392-8187
Fax: (434) 392-1088

Buckingham County Health Department
80 Administration Lane, Buckingham, VA 23921
Phone: (434) 969-4244
Fax: (434) 969-1292

Lunenburg County Health Department
11387 Courthouse Rd, Lunenburg, VA 23952
Phone: (434) 696-2346
Fax: (434) 696-1271

Charlotte County Health Department
270 David Bruce Ave, Charlotte Court House, VA 23923
Phone: (434) 542-5251
Fax: (434) 542-4354

Nottoway County Health Department
207 West Courthouse Rd, Nottoway, VA 23955
Phone: (434) 645-7595
Fax: (434) 645-8197

Email forms to sarah.nelson@vdh.virginia.gov
(Prince Edward, Charlotte, Buckingham offices)

dixon.mercado-soltero@vdh.virginia.gov
(Nottoway, Lunenburg, Amelia, Cumberland offices)



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List of accredited food managers certification programs:

1. AAA Trainers LLC (DBA: AAA Food Handler/1 AAA Food Handler)
2. APS Culinary Dynamics (DBA: World Food Safety Organization)
3. Certus/StateFoodSafety
4. DSBWorldWide, Inc (DBA: EduClasses®)
5. Learn2Serve
6. My Food Service License
7. National Registry of Food Safety Professionals
8. National Restaurant Association Solutions (ServSafe)
9. Relish Works, Inc. (DBA: Trust20)
10. Responsible Training / Safeway Certifications, LLC
11. The Always Food Safe Company, LLC
12. Userve