FI-230 (1/2020)

1. Check one:	2. Check one:				FOOD SERVICE LICENSE			
Renewal License	enewal License Fixed Establishment			APPLICATION				
Application		Mobile		Mic	Michigan Department of Agriculture & Rural Development			
New Owner		Mobile Commissary		A	As required by Act 92, Public Acts of 2000, as amended			
New Est. or New		Special Transitory Food Unit (STFU)			For license year ending: April 30, 2021			
Location		Opeciai 11	ansitory i dod offit (c	,				
Mailing Address (Number & Street, Box or Route)					License No. L2000ID  5. Applicant Information - MUST BE COMPLETED			
Mailing Address (Number & Street, Box of Notice)					I certify that this information is accurate			
1				7	nature		Date	
City		Ctata	Zin Codo	X				
City		State	Zip Code	Pri	nted name of owner	or authorize	d agent	
3. Business & Owner	Informa	ation						
			nt)	Tit	le	E-Mai	ı	
Traine of Establishmon	Name of Establishment or Business (type or print)						•	
Establishment Address (Number & Street, Box or Route)					tablishment Phone N	o. Home Phone No.		
City		Zip	County of Loc	ocation Fax	No	Emer	Emergency Phone No.	
		2.10	County of Loo			2	goney i none ito.	
Name of Owner (First,	MI, Last	t) (Individual or 0	Corporation)	6	Renewal Due	Date: A	pril 30, 2020	
					6. Renewal Due Date: April 30, 2020 Amount Due: \$			
Owner's Address					mount Due. ψ_		<del></del>	
City		State 7im Code		If r	If renewal application is submitted after April 30,			
City		State Zip Code			2020 add \$			
4. Mobile Establishment Licensing Information					Make check payable to your local health department.			
Decal No. (Health Dept. Issued) VIN No.					iviake check payable to your local fleatin department.			
Vehicle Make		License Plate No. & State						
Business Name on Vehicle		Commissary License No.			Mail application and fee payable to:			
THIS AREA FOR LOC Delete License	AL HEA	ALTH DEPARTM	IENT (LHD) USE					
Delete License								
Fee Exempt State:	Yes	No						
Fee Exempt Local:	Yes	No	Licens	e Limitation				
Fee Exempt Veteran: You		No STFU Last 2 Fee Inspec		ee Inspection	Dates:			
LHD: Retain copy of Act 359 Veteran's License	100	140	Date:	Da	ate:			
						1		
License No. Seasonal Establishment (c			(check if sea	c if seasonal)				
Amount Received LHE		HD No. Civil Di		Civil Division		-		
Receipt No. Check N				Check No.				
Signature of Health Department Representative					Date			

## Michigan Department of Agriculture & Rural Development Food Service License Application Instructions to Applicant

## **Renewal Application**

- A. **Review Sections 1-4 for accuracy.** Please review the pre-printed application and make any necessary corrections. Please pay special attention to the facility name and address.
  - a. DO NOT USE THE RENEWAL FORM IF ONE OF THE FOLLOWING APPLY:
    - ✓ Change of ownership
    - ✓ Change in the physical location of establishment
    - ✓ Change of license type
  - b. If one of these situations apply, fill out a new license application. To obtain a new "Food Service License Application", contact your local health department or download the form at:

     www.michigan.gov/mdard
     (Licensing, Food Industries), or click on keyword and enter "foodserviceapp". The pre-printed renewal form should be returned to the local health department along with the new application.
- B. Complete Section 5. Be sure to sign the application.
- C. **Include license fee** amount shown in **Section 6**. Make checks payable to your local health department.
- D. **Special Transitory Food Unit (STFU) renewal applications.** If you are a Special Transitory Food Unit (STFU) as identified in box #2 on the application, you must include a copy of the two paid inspections, along with your application form and check.
- E. Mail to your local health department before April 30<sup>th</sup> to avoid a late fee.

## **New Application**

- A. Complete all applicable parts of **Sections 1-5**. **Be sure to sign the application**.
- B. Contact your local health department for fee and mailing address if not shown in **Section 6**. Make checks payable to your local health department.
- C. Return completed application form along with the fee to your local health department.

## **Definitions**

Special Transitory Food Unit (STFU):	Mobile Food Service Establishment:
Means a temporary food service establishment that	Means a food service establishment operating from
operates throughout the state without the 14 day	a vehicle, trailer or watercraft which is not fully
limit.	equipped for full food service and, therefore, must
	return to a licensed commissary at least once every
	24 hours for servicing and maintenance.