



# City of Webster

## FOOD DEALER APPLICATION

*101 Pennsylvania Ave. ❖ Webster, TX 77598*

**Office Hours**  
 Mon.-Thur. 7:30am-5:30pm  
 Friday 7:30am-11:30am  
 OFC: (281) 338-2925  
 FAX: (281) 316-4128

[www.cityofwebster.com](http://www.cityofwebster.com)

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Today's Date

Permit # \_\_\_\_\_  
 (For Office Use Only)

Renewal                       New Establishment                       Change of Ownership

Name of Facility \_\_\_\_\_ Telephone # \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Fax # \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Name of Owner \_\_\_\_\_ Owner E-Mail Address: \_\_\_\_\_

Name of General Manager/Kitchen Manager (PIC): \_\_\_\_\_

Manager E-Mail Address: \_\_\_\_\_

Certified Food Manager: \_\_\_\_\_

Type of Certification and Certification Number: \_\_\_\_\_

❖❖❖ (All food establishments preparing food shall have a certified food manager) ❖❖❖

Individual                       Firm                       Corporation                       Partnership

**Mail Permit and other Correspondence To:** (If Address Different from Above):

Business Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Fax # \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Type of Establishment: Full Service      Single Serve      Convenience      Other \_\_\_\_\_

Smoking Permitted: YES / NO                      Signs Posted: YES / NO      Seating Capacity: \_\_\_\_\_

Exception Area For Non-Smokers: YES / NO      Signs Posted: YES / NO

Posting of Consumer Advisories: Heimlich YES / NO      Raw Shellfish Warning YES / NO

Buffet Plate YES / NO

Food Dealer's Permit Fee..... \$200.00

**Mail to:** City of Webster 101 Pennsylvania, Webster, TX 77598

\_\_\_\_\_  
 Signature of Applicant or Representative