2024 Application for a	License t	o Conduct a	(check onl	ly one) [	Food Service Operation  Retail Food Establishment		
				L	Trotain 1 ood Eddabiloniinoint		
Instructions:							
<ol> <li>Complete the application section.</li> <li>Sign and date the application.</li> <li>Make a check or money order pay</li> </ol>		rrections if necessar rgan County Health					
<ol> <li>Return check and signed application</li> <li>Morgan County Health Demonstrates</li> </ol>	•	1/2024					
4275 N SR 376 NW McConnelsville, OH 4375							
*There is a mandatory penalty fee of 25% deadline (Chapter 3717 of the Ohio Revi		I fee for operating a	food service op	eration or	retail food establishment after the		
Before license application can be proces application and remit the proper fee will i							
Name of Facility			Name of License	Name of License Holder			
Address			Email				
City				State	ZIP		
Phone # Fax #					Check if applicable  Catering Seasonal		
Name of individual certified in food protection (if any	) and their certificate	e number (use back for ad	ditional names)				
Mailing address for annual renewal if	different than a	above:					
Name of parent company or owner Phone #							
Address				Email			
City				State	ZIP		
I hereby certify that I am the license holder indicated above:	r, or the authorize	d representative, of th	e food service ope	eration or re	tail food establishment		
Signature					Date		
Licensor to complete below							
Category							
License fee	+ Late fee + S				= Total amount due		
Application approved for license and cer	tified as require	d by Chanter 3717	of the Ohio Revi	ised Codo			
By			Audit no.	oca coae.	License no.		