RUSH COUNTY HEALTH DEPARTMENT 101 E. 2ND Street, Room 105, Rushville, IN 46173 (765) 932-3103 (765) 938-2604 FAX

Annual Retail Food Permit Application Please indicate permit type:

Restaurant / Grocery Permit Fee: \$160.00 ☐ Caterer / Mobile Vendor Permit Fee: \$200.00 per vehicle ☐ Mobile Pre-packaged Frozen Food Permit Fee: \$100.00 per vehicle Farmer's Market Frozen Meat, Vegetables, & Cider Permit Fee: \$100.00 Make check or money order payable to Rush County Health Department. Email application to: rcdh2@rushcounty.in.gov or drop off to office listed above. Please be advised, that after the expiration date on the permit, there will be a late penalty equal to the permit cost. Owner Name: _____ Home Phone: _____ Address: _____ City: ____ State: ____ Zip Code: ____ Mailing Address: Business Business Name: _____ Phone: _____ Name of Certified Food Handler: ______ Certification Expires: Operator / Manager Name: _____ VENDING MACHINES ONLY: Name of ALL businesses where vending machines are located. (Use back if necessary.) Name: ______ Address: _____ _____ State: _____ Zip: ____ Phone: _____ Number of Machines Containing Potentially Hazardous Foods: _____ Sewage: Septic:____ City:____ Water Supply: Well:_____ City:_____ Hours of Operation Liquor License: No: Yes: If Yes, Number List Name and Address of Suppliers of the following Products: Mobile Vendors, Please List Menu Items Here: Bakery: Dairy: FOR RUSH COUNTY HEALTH DEPARTMENT USE ONLY: Permit #_____

Updated 6/26/24

Restrictions: