



**CITY OF LIVE OAK
DEVELOPMENT SERVICES
8001 SHIN OAK DRIVE
LIVE OAK, TEXAS 78233-2497
(210) 653-9140 Ext. 244 Fax: (210) 653-0935**

APPLICATION FOR FOOD ESTABLISHMENT PERMIT

Permit Number _____

I, _____, hereby apply for permit to operate a

Food Establishment

to be known as _____

and located at _____

in the City of Live Oak, Bexar County, Texas.

Type of Food Establishment _____

Proposed Number of Employees, including the Proprietor _____

I hereby certify that I have reviewed a copy of the Live Oak Food Establishment Ordinance No. 1245 of December 13, 2005, and that if granted a permit, I will comply with all of the provisions of said ordinance.

Dated this _____ day of _____, 20_____.

(Signature of Owner) (Address) (Telephone Number)

(Signature of Owner) (Address) (Telephone Number)

Initial Permit _____ **Renewal** _____

Amount Paid \$ _____

SCHEDULE OF FEES FOR FOOD ESTABLISHMENT PERMITS

Food Establishment Permit	\$500.00
Private Food Service Facility	\$325.00
Temporary Establishments (Itinerant Food Establishments)	\$50.00 per event
Mobile Food Vendor and Seasonal Vendor permits	\$225.00
Charge for Food Handler Training Class	\$18.00 per person