



Ector County, Texas

## APPLICATION FOR FARMERS MARKET ONLY PERMIT

**PLEASE CHECK ONE:**  **Annual Renewal**  **Application For Permit**

**INSTRUCTIONS:** Please complete the application in detail. **Note:** A health permit is for one year. *Please submit this application (by mail or in person) with the appropriate fee.*

### Vendor Information

Facility/Vendor Name: \_\_\_\_\_

Facility/Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Owner's Phone: \_\_\_\_\_

Owner's Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Email (must fill out): \_\_\_\_\_ (Used for communication)

Manager's name: \_\_\_\_\_

Certified Food Manager (CFM) present:  Yes  No CFM expiration date: \_\_\_\_\_

Type of Facility/Vendor: \_\_\_\_\_

Does the facility have a mobile food truck?  Yes  No

(If yes, then please fill out a mobile unit application along with this one)

Is the facility connected to a  Public water supply  Water well

Is the facility connected to a  City Sewer  Septic System (On-Site Sewage Facility)

Payment: Cash/Credit card/Check \_\_\_\_\_

(check number)

The applicant hereby acknowledges an understanding of the provisions of the ordinance relative to the payment of fees, expiration date of permit, renewal requirements, permit suspension.

Signature of Applicant  
Office use only:

\_\_\_\_\_ Date \_\_\_\_\_

Date: \_\_\_\_\_ Facility FA Number: \_\_\_\_\_

Reviewed and Approved by: \_\_\_\_\_

Scanned to Envision Connect

### Permit Fee Charges

**\$100/year**