

**City of Butler
140 W. North Street
Butler, PA 16001**

Retail Food Establishment License Application

1. **Licensee: LEGAL OWNER Name:** _____

Email: _____ Office Phone: _____ Cell Phone: _____

Type of Business: (Circle One) Co-op, Corporation, LLC, LLP, Sole Proprietorship, Non Profit, Partnership

Address: _____
Number Street City State Zip

2. **Facility Name: NAME ON DOOR:** _____

Address: _____
Number Street City State Zip

Email: _____ Office Phone: _____ Cell Phone: _____

3. **Mailing Address:** _____
Number Street City State Zip

24 hour Contact Person: _____ Title: _____

EVENT: _____ Dates of Event: _____

License Plate Number if Food Truck/ Ice Cream Truck. _____ State _____

4. Type of License: Circle One

Annual Inspection **	\$150	Fee	New Establishment	\$200	Fee	New Owner Existing Establishment	\$200	Fee	
Temporary License	\$50	Fee	Plan Review	\$150	Fee	Late Fee **		\$35	Fee
Non Profit Renewal	\$150	Fee							

5. ATTACH CHECK OR MONEY ORDER PAYABLE TO: The Bureau of Health

DO NOT SEND CASH!

6. MAIL TO: City of Butler, 140 W North Street, Butler, PA 16001.

7. Applicant Must Print and Sign Below: All the information provided on and with this application is correct.

Print: _____ Sign: _____ Date: _____

**** A Completed License Renewal is due on or before the 5th day in which your license expires or a late fee will be added.**

Incomplete applications will not be accepted. Application must include all copies requested to be complete.

For questions contact the Health Officer, Patrick McGuire, 724-968-9263.