



OL _____ OR _____ CONTROL#: _____

CONCESSION PERMIT APPLICATION

Fee: \$100.00

New Permit Expiration Date: _____
Please return by: _____

New Permit () Renewal () Change of Ownership () Remodel ()

Return to: **City of McKinney**
Code Compliance/Food
410 N. Tennessee St.
McKinney, Texas 75069

Mail to: **City of McKinney**
or Code Compliance/Food
P.O. Box 517
McKinney, Texas 75070

Completely fill out application or application will not be processed. (Please Print)

Name of Establishment _____
Address of Establishment _____
McKinney, Texas _____
Phone _____

Responsible Person / Title _____
Address _____
City/State/Zip _____
Phone _____
Email _____

Type of Owner Sole () Corporation () Partnership ()
Name of Owner / Corp _____
Mailing Address _____
City/State/Zip _____
Phone _____
Email _____

Certified Food Managers Name _____
TDH Certification Number _____ Expiration Date _____

****The City of McKinney Food Ordinance requires that all food service workers successfully complete a food safety training course. All employees, excluding CFM, must complete an accredited TDSHS Food Handler Education or Training Program (FHP) within 30 days of submission of permit. They will be issued a completion certificate, which is valid for 2 years.****

*TDSHS FHP Completion Date _____

Hours of Operation _____
Total Number of Employees _____ Average number per shift _____

For questions or comments, please contact the City of McKinney, Code Compliance at (972) 547-7440, e-mail healthinfo@mckinneytexas.org. Thank you for your business in the City of McKinney.

Signature / Print _____

Date _____

Office Only:
Date _____ H.T.E. _____ Receipt # _____ Fees\$ _____ CASH/CHECK License # _____