



SUTTER COUNTY

DEVELOPMENT SERVICES DEPARTMENT

Building Inspection
Code Enforcement

Engineering/Water Resources
Environmental Health

Planning
Road Maintenance

APPLICATION FOR PERMIT TO OPERATE A FOOD FACILITY

Name of Facility

Facility Address

City

Facility Owner Name

Facility Phone Number

Owner Mailing Address

City **State** **Zip**

Owner Phone Number

Email Address

Facility Type

License Plate Number (mobile food only)

Seating Capacity: 0-25 [] 26-50 [] 51+ []

Building Square Footage:

Under 2,000 sq. ft. [] 2,000-5,000 sq. ft. [] 5,000-25,000 sq. ft. [] 25,000 + sq. ft. []

Water Supply: **Public** [] **Private Well** []

Incidental Food []

I declare that the above statements are true and correct. I hereby consent to all necessary inspections made pursuant to law and incidental to the issuance of this Permit and the operation of this business.

Signature

Date

Receipt No.:_____ Check No.:_____ Date:_____ By:_____