1. Check one:	2. Check one:				FOOD SERVICE LICENSE		
Renewal License	Pengwal License — Fixed Establishment				APPLICATION		
Application		Mobile				igan Department of A	griculture & Rural Development
New Owner		Mobile Commissary			As required by Act 92, Public Acts of 2000, as amended		
			•				e year ending:
New Est. or New Location		Special	ransitory Food Unit (	STFU)		April :	30, 2022
						nse No.	L2000ID
Mailing Address (Number & Street, Box or Route)					5. Applicant Information - MUST BE COMPLETED I certify that this information is accurate		
				Į.		ature	Date
					X		
					Printed name of owner or authorized agent		
				j			_
3. Business & Owner Information							
Name of Establishment or Business (type or print)					Title		E-Mail
					F-1-1	Halaman ( Dhana Na	Hama Bhana Na
Establishment Address (Number & Street, Box or Route)					Estai	blishment Phone No	. Home Phone No.
City		Zip County of Loc		ation Fax	Fax N	No.	Emergency Phone No.
		—·P					
Name of Owner (First,	MI, Last	t) (Individual or	Corporation)		٤R	enewal Due I	Date: April 30, 2021
					6. Renewal Due Date: April 30, 2021 Amount Due: \$		
Owner's Address					Amount Due. \$		
							eats: \$475.00 101+ seats: \$575.00
City		State	Zip Code				Hall with kitchen, Commissary: \$500.00 is submitted after April 30,
			-				io dubililitod ditol 7 pril 00,
4. Mobile Establishm		· -	ition				
Decal No. (Health Dept. Issued)		VIN No.			May 1- May 31: \$150.00 June 1- June 30: \$300.00  Make check payable to: City of Detroit  Mail application and fee to:		
Vehicle Make		License Plate No. & State					
Vernole Make		License Flate No. & State					
Business Name on Vehicle		Commissary License No.					
Business Name on Venicle		Commissary Election No.			Wall application and ree to.		
		<u> </u>				oit Health Depar	ment
THIS AREA FOR LOC	AL HEA	ALTH DEPARTI	MENT (LHD) USE			d Safety	
Delete License					100 Mack Ave. #311		
					Detr	oit, MI 48201	
Fee Exempt State:	Yes	No		<u> </u>			
Fee Exempt Local:	Yes	No	Licens	e Limitatio	n		
Fee Exempt Veteran: Yes No STFU Last 2 Fee Inspec					ion Da	ates:	
LHD: Retain copy of Act 359 Veteran's License	100	110	Date:		Date	e:	
veteran's License							
License No.	9	Seasonal Establ	ishment	(check if	seaso	onal)	
Amount Received LHD No. Civil Divi						,	
	4982 CIVII DIV. 4982						
	F	Receipt No. Check No.					
Signature of Health Departm	ent Repre	sentative				Date	
5							

## Michigan Department of Agriculture & Rural Development Food Service License Application Instructions to Applicant

## **Renewal Application**

- A. **Review Sections 1-4** for accuracy. Please review the pre-printed application and make any necessary corrections. Please pay special attention to the facility name and address.
  - a. DO NOT USE THE RENEWAL FORM IF ONE OF THE FOLLOWING APPLY:
    - ✓ Change of ownership
    - ✓ Change in the physical location of establishment
    - ✓ Change of license type
  - b. If one of these situations apply, fill out a new license application. To obtain a new "Food Service License Application", contact your local health department or download the form at: <a href="https://www.michigan.gov/mdard">www.michigan.gov/mdard</a> (Licensing, Food Industries), or click on keyword and enter "foodserviceapp". The pre-printed renewal form should be returned to the local health department along with the new application.
- B. Complete Section 5. Be sure to sign the application.
- C. **Include license fee** amount shown in **Section 6**. Make checks payable to your local health department.
- D. **Special Transitory Food Unit (STFU) renewal applications.** If you are a Special Transitory Food Unit (STFU) as identified in box #2 on the application, you must include a copy of the two paid inspections, along with your application form and check.
- E. Mail to your local health department before April 30th to avoid a late fee.

## **New Application**

- A. Complete all applicable parts of **Sections 1-5**. **Be sure to sign the application**.
- B. Contact your local health department for fee and mailing address if not shown in **Section 6**. Make checks payable to your local health department.
- C. Return completed application form along with the fee to your local health department.

## **Definitions**

Special Transitory Food Unit (STFU):	Mobile Food Service Establishment:
Means a temporary food service establishment that	Means a food service establishment operating from
operates throughout the state without the 14 day	a vehicle, trailer or watercraft which is not fully
limit.	equipped for full food service and, therefore, must
	return to a licensed commissary at least once every
	24 hours for servicing and maintenance.