



Environmental Health Department

P.O. Box 384, Dripping Springs, Texas 78620
Phone: (512) 858-4725 Web: www.cityofdrippingsprings.com
Health Inspector email: kdehart@cityofdrippingsprings.com

Food Establishment Permit

1-15 Employees \$235 16-30 Employee \$335 31+ Employees \$435

Date: _____

Name of Applicant: _____ Phone #: _____

Name of Establishment: _____ Email Address _____

Site Address: _____ City: _____ State: _____ Zip _____

Mailing Address: _____ City: _____ State: _____ Zip _____

Types of Food Being Served:

Floor Plans Submitted: YES NO

Waste Water Disposal: TYPE: _____ APPROVED: YES NO

Date of Planned Opening: _____

FOR OFFICE USE ONLY

Date Inspected: _____

Equipment Temps: _____ _____ _____ _____

Food Manager Certified: _____ Date Expired: _____

Food Handler Certified: _____ Date Expired: _____

Permit Approved Approved Denied

Comments: _____

Re-inspection Required: YES NO