

Bay County Environmental Health Division
1212 Washington Avenue, Bay City, Michigan - (989) 895-4006
Food Service Consultation \$185.00
Change of Ownership \$300.00

Receipt # _____

Amount _____

Check # _____

Date Submitted: _____

Applicant's Name: _____ Email: _____

Address: _____ / _____ / _____ / _____
Street City State Zip

Telephone: Home#: _____ Work#: _____

ESTABLISHMENT INFORMATION

Name of Establishment: _____

Establishment Address: _____

City: _____ Zip Code: _____ Township: _____

Proposed New Name of Establishment: _____

Proposed Date For Opening: _____

Reason For Consultation: _____

*****Must provide menu, SOP's Copy of Food Manager Certificate and Allergen Certificate if applicable.****

****FOR HEALTH DEPARTMENT USE ONLY****

Pre-Opening Inspection Date: _____

- Checklist Complete
- Menu
- Establishment is in Substantial Compliance with the Food Law of 2000
- Establishment is NOT in Substantial Compliance with the Food Law of 2000.
- A Follow-Up Inspection must be conducted prior to opening
- Establishment to be remodeled
- As-built plans required if not on file
- Standard operating procedures required, submitted & approved If required SOP cover sheet complete
- Certified manager, if required
- 90 day follow-up for certified manager

Sanitarian Signature

Date