Johnston County Environmental Health Office 309 E. Market St. Smithfield, NC 27577 Telephone: (919) 989-5180 Fax: (919) 989-5190

APPLICATION FOR A LIMITED FOOD SERVICE ESTABLISHMENT

Operator (School, Town, etc.):	
Contact Person:	Phone:
Address:	
Days and Hours of Operation (please at	tach a schedule of games):
*STATEMENT: I hereby certify that 1	the above information is correct, and I fully the above without prior approval from the ne application.
Signature of Applicant:	Date:
Establishment. Payment must be receiv	permit issued to a Limited Food Service yed in our office prior to the inspection date. The permit expires on December 31 st of this
Please submit this application and fee a stand.	t least 7 days prior to opening the concession

Return application and fee to :	Johnston County Environmental Health
	309 East Market Street
	Smithfield, NC 27577