



Yakima Health District

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 Union Gap, Washington 98903
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<http://www.yakimahealthdistrict.org>

For Office Use Only

Case # _____
 Date _____ Initial _____
 Amt _____ Check# _____
 Rec# _____
 Status Updated

FOOD AND BEVERAGE LICENSE APPLICATION/RENEWAL

Establishment Name: _____ Previous Name (if applicable): _____

Applicant Name & Title: _____ Phone: _____

Owner (if different from applicant): _____ Phone: _____

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

Physical Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Business Days/Hours: _____

NEW Food Establishments/Mobile Units must also submit a Plan Review Packet with this application.

Incomplete applications will NOT be accepted.

Service and Fees			
Clearly mark your selection in the right column			
Level 1 NEW Food Establishment	\$261	H_HFD012 \$118, H_HFD023 \$22, H_HFD024 \$22, H_HFD015 \$99	
Level 1 License or Renewal	\$118	H_HFD025 \$118	
Level 2 NEW Food Establishment	\$486	H_HFD042 \$299, H_HFD040 \$44, H_HFD041 \$44, H_HFD039 \$99	
Level 2 License or Renewal	\$299	H_HFD026 \$299	
Level 3 NEW Food Establishment	\$662	H_HFD014 \$431, H_HFD044 \$66, H_HFD045 \$66, H_HFD043 \$99	
Level 3 License or Renewal	\$431	H_HFD027 \$431	
Catering Endorsement (restaurant add-on)	\$180	H_HFD006 \$180	
Multiple Food Service NEW Establishment	\$861	H_HFD011 \$630, H_HFD045 \$66, H_HFD045 \$66, H_HFD043 \$99	
Multiple Food Service License or Renewal	\$630	H_HFD047 \$630	
NEW Mobile Unit Level 2	\$615	H_HFD002 \$428, H_HFD039 \$99, H_HFD040 \$44, H_HFD041 \$44	
Mobile Unit 2 License or Renewal	\$428	H_HFD049 \$428	
NEW Mobile Unit Level 3	\$791	H_HFD004 \$560, H_HFD044 \$66, H_HFD045 \$66, H_HFD043 \$99	
Mobile Unit Level 3 License or Renewal	\$560	H_HFD050 \$560	
NEW Owner	\$66	H_HFD017 \$66	
NEW Name	\$44	H_HFD018 \$44	
License Difference – Level 1 -> Level 2	\$181	H_HFD054 \$181	
License Difference – Level 2 -> Level 3	\$132	H_HFD055 \$132	
Plan Review (Level 1, Level 2, Level 3)	\$22-66	H_HFD023 Level 1 \$22, H_HFD040 Level 2 \$44, H_HFD044 Level 3 \$66	
Pre-opening Inspection (Level 1, Level 2, Level 3)	\$22-66	H_HFD024 Level 1 \$22, H_HFD041 Level 2 \$44, H_HFD045 Level 3 \$66	
Late Fee Payment	\$60	H_HFD010 \$60	

Above fees are based on an average time estimate. If time commitment exceeds the built-in time allotment, the facility will be billed on an hourly rate of \$132/hr. H_HFD051

My signature below attests to the accuracy of the information provided above. It denotes intent to comply with all applicable state and local regulations. It is my understanding that the permit is non-transferable. Failure to fully complete this form or pay the correct permit fee will result in it being returned to the applicant.

Signature: _____ Date: _____