



BOISE CITY

**EATING AND DRINKING
LICENSE APPLICATION**

OFFICE USE ONLY

DATE _____

CITY LICENSE # _____

NEW RENEWAL

CENTRAL DISTRICT HEALTH DEPT. PERMIT
(REQUIRED FOR BOTH NEW AND RENEWAL APPLICANTS)

ASSEMBLY PERMIT (OCCUPANCY OF 50 OR MORE)

NON REFUNDABLE FEES:

LICENSE \$ 32.50

ASSEMBLY PERMIT \$ 110.00 (required for occupancy of 50 or more)

PROCESSING. \$ 1.50

TOTAL FEES DUE _____

LICENSE EXPIRES ANNUALLY DECEMBER 31ST

A COPY OF THE CURRENT CENTRAL DISTRICT HEALTH DEPARTMENT
PERMIT **MUST** BE INCLUDED WITH ALL APPLICATIONS.

NAME OF BUSINESS _____ BUSINESS PHONE _____

PHYSICAL LOCATION _____
Street City Zip

MAILING ADDRESS _____
(if different from above) Street City Zip

OWNER/MANAGER NAME _____ PHONE _____
First Last

RESIDENCE ADDRESS _____
Street City Zip

EMAIL ADDRESS _____

TYPE OF BUSINESS:

_____ RESTAURANT

_____ MOBILE UNIT

_____ BAR

_____ CONVENIENCE STORE

_____ CAFETERIA

_____ BAKERY

_____ CATERER

_____ OTHER (describe)

SIGNATURE OF OWNER/MANAGER

DATE