



Due to a change of ownership, the undersigned license holder grants permission to transfer the enclosed 20____ Food Service Operation Retail Food Establishment _____ effective _____ Date License Number _____

PLEASE PRINT LEGIBLY:

FROM:

TO:

License Holder Name

New License Holder Name

Name of Facility

New Name of Facility

Facility Address

Facility Address

City, State, Zip

City, State, Zip

Total Square Feet

Will the operation be seasonal? Yes No

Sq Ft Devoted to Food

Are there any equipment changes? Yes No

If yes, please include manufacturer names and model numbers.

NOTE: Ohio Revised Code Section 3717.26 (B) and 3717.46 (B) requires the person or government entity requesting a license transfer be in compliance with the state food code. Upon license transfer the new license holder must comply with the current Ohio Uniform Food Safety Code.

I certify to the above.

I certify to the above.

Previous Owner Signature Date

New Owner Signature Date

New owner must complete an application for a new license (attached) and include menu.

For Health Department Use:

Registered Environmental Health Specialist Recommendation _____

REHS Approval Signature: _____ Date _____

Food Programs Supervisor Approval Signature: _____ Date _____

Environmental Health Director Approval Signature: _____ Date _____

Health Commissioner Approval Signature: _____ Date _____

20 Application for a License to Conduct a: (check only one) Food Service Operation

Retail Food Establishment

Instructions:

1. Complete the applicable section. (Make any corrections if necessary.)
2. Sign and date the application.
3. Make a check or money order payable to: MEDINA COUNTY HEALTH DEPARTMENT for **\$0.00**
4. Return check and signed application by*:

**to: MEDINA COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL DIVISION
4800 LEDGEWOOD DRIVE
MEDINA, OHIO 44256**

*There is a mandatory penalty fee of 25% of the renewal fee for operating a food service operation or retail food establishment after the deadline (Chapter 3717 of the Ohio Revised Code).

Before license application can be processed the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in not issuing/renewing a license. This action is governed by Ohio Revised Code 3717.

Name of Facility		Name of License Holder	
Address		E-mail	
City		State	ZIP
Phone #	Fax #	Check if applicable <input type="checkbox"/> Catering <input type="checkbox"/> Seasonal	
Name of individual certified in food protection (if any) and their certificate number (use back for additional names)			

Mailing address for annual renewal if different than above:

Name of parent company or owner		Phone #	
Address		E-mail	
City		State	ZIP
<i>I hereby certify that I am the license holder, or the authorized representative, of the food service operation or retail food establishment indicated above:</i>			
Signature		Date	

Licenser to complete below

Category TRANSFER			
License fee	+ Late Fee	+ State amount	= Total amount due
\$0.00		\$0.00	\$0.00

Application approved for license and certified as required by Chapter 3717 of the Ohio Revised Code.

By	Date	Audit no.	License no.
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