



# COMMUNITY SERVICES DEPARTMENT

LICENSE & PERMIT CENTER

103 SW 4th Street • Room 115 • Lawton, Oklahoma 73501

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[www.cityof.lawton.ok.us](http://www.cityof.lawton.ok.us)

## TEMPORARY FOOD-SERVICE ESTABLISHMENT APPLICATION

NEW APPLICATION

RENEWAL

DATE:

### BUSINESS INFORMATION

Business Name

Type of Business:

Is Business A Corporation?

YES

NO

Street Address:

Business Mailing Address:

City:

Business Telephone No:

State/Zip:

### APPLICANT INFORMATION

Applicant's Name

Applicant's Home Address:

City:

Home Telephone No:

State/Zip:

### RELATED LICENSING

State License Number:

Expiration Date:

I certify under penalty of perjury that the information contained on this application is true and correct. I further understand that any incorrect information contained on this application may result in the revocation of any license issued and/or criminal prosecution.

Signature of Applicant: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

Notary Signature:

\_\_\_\_\_

### LICENSE AND PERMIT ACTION

APPROVED:

DENIED:

License No:

Denial Letter Date:

Receipt No:

Certified Mail Number:

Issue Date:

Expiration Date:

Appeal Time Expires:

License Clerk:

Supervisor Approval: