

Habersham County Environmental Health Department

130 Jacob's Way STE 102 Clarkesville, GA 30523

Phone: 706-839-0277 Email: habersham@dph.ga.gov

Food Service Site Prior Evaluation Application

Application Date:	*Attach a copy of the current floor plan, and your proposed floor plan.		
Applicant Contact Information			
Applicant / Owner Name:			
Mailing Address: Street:		City:	Zip:
Main Phone:		Alternate Phone:	
Email:			
Establishment Information			
Previous Name of Establishment:		Previous use: ☐ Food Service ☐ Other:	
Location of Establishment (Street Address):			
Proposed (New) Name of Establishment:			
Intended Use			
Water Supply (choose one): ☐ Public ☐ Well		Building Size Ft. by Ft.	
Sewage Disposal (choose one): ☐ Public ☐ Septic		Septic Permit Number:	
Previous Use:			
Mark one:	☐ Specific Use- <i>Attach site plan showing facility floor plan, and proposed equipment.</i>		
	☐ Recommend Use- <i>Indicate desired facility location- See inspector recommendations.</i>		
Proposed Operation: ☐ Bar/Lounge ☐ Commissary ☐ Full Service Restaurant ☐ Mobile/Extended Unit ☐ High Risk Food Service ☐ Pop-Up ☐ Temporary Food Service ☐ Restricted Food Service ☐ Other: _____			
Inspector:		Date Inspected:	

It is the responsibility of the applicant to verify compliance with all regulations of other state, and/or municipality departments. (e.g. Business License, Planning and Zoning, and Building Inspection). A preliminary site inspection is performed on the basis of information provided by the applicant, the current site conditions, and current regulations and policies. If the information, site conditions, regulations, and/or policies, change after the date inspected, these recommendations/comments will be invalidated. The comments provided are not considered an approval or guarantee of permit issuance.

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Recommendations

(department use only)

Date/Initials:

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