

CITY OF RICHARDSON HEALTH DEPARTMENT

TEMPORARY OPEN AIR MARKET OPERATOR PERMIT APPLICATION

P.O. Box 830309, Richardson, Texas 75083-0309 • (972) 744-4080

(TYPE OR PRINT ALL INFORMATION)

| | Please check one: | □ New | □ Renewal | |
|----------------------|------------------------------|---------------|----------------------------|------------|
| NAME OF OPEN AIR MAR | KET: | | | |
| ADDRESS/LOCATION OF | OPEN AIR MARKET: | | | |
| OPERATING DATES AND | HOURS: | | | |
| OPERATOR NAME: | | | | |
| BUSINESS NAME: | | | | |
| OPERATOR HOME ADDR | ESS:(STREET NO. & NAME) | | | (ZIP CODE) |
| MAILING ADDRESS: | (STREET NO. & NAME/P.O. BOX) | | (CITY, STATE AND ZIP CODE) | |
| PHONE: | ALT PHONE: | | | |
| BUSINESS WEBSITE: | | ····· | | |
| EMAIL ADDRESS: | | | | |
| APPLICANT'S SIGNATUR | E: | | | |
| TODAYS DATE: | | | RATING DATE: | |
| | | | | |
| | ** PLEASE DO NOT V | VRITE BELOW 1 | THIS LINE ** | |
| APPROVED BY: | | | | |
| COMMENTS: | | | | |
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