**ADLM Counties** Environmental Public Health

Telephone: (641) 724-3511

## Mail completed application and

submit payment to: Al En 12

## **VENDING MACHINE LICENSE APPLICATION**

| submit payment to:                                      |               |             | Date of Application:   |   |           |            |
|---|---------------|-------------|--|---|-----------|------------|
| ADLM Counties Environmental Public Health               |               |             | Anticipated Opening Date                                     |   |           |            |
| 12307 Highway 5, P.O. Box 399<br>Moravia, IA 52571      |               |             | Has ownership changed since last license was issued? If yes: | [] Yes  |           |            |
|   |               |             |  | Give previous owner name                            |           | and        |
|   |               |             |  | license number:                                     |           | (If known) |
|   |               |             |  |   |           |            |
|   |               |             |  |   |           |            |
|   |               |             |  |   |           |            |
| <b>Establishment Information</b> (if a Note: a          |               |             |  | on renewal application usiness address or ownership | )         |            |
| Name of Business:                                       |               |             |  | Ownership Type                                      | :         |            |
| Owner's Name:   |               |             |  |   |           |            |
|   |               |             |  |   |           |            |
| Alternative or Cell Phone                               |               | Bu          | isiness E-mail   | Address:  |           |            |
| Physical Business Address:                              |               |             |  | Suite #   | County:   |            |
| City  |               |             |  | State   | Zin Code  | ,.         |
| City:   |               |             |  | State   | Zip Code  | -          |
| Person-In Charge (onsite)                               |               | Tit         | le of Person-I   | n-Charge  |           |            |
| Person-In-Charge Phone                                  |               | Per         | son-In-Charge  | e Email   |           |            |
| Mailing address for all corresponden                    |               |             |  |   |           |            |
|   |               |             |  |   |           |            |
| Attn:   |               | Telo        | ephone Numb  | per: ( )  |           |            |
| Street or Route:  | Sui           | te# City    | :  | State:  | Zip code: |            |
| Commissary or Warehouse Info                            |               |             |  |   |           |            |
| Establishment Name:                                     | (location )   | License Nun |  | a, or scorea;                                       |           |            |
| Address:  |               | Owner:      | 1001.  |   |           |            |
| City: State:  | Zip:          | Phone: ( )  | Cell p   | phone: ( ) Email:                                   |           |            |
| License Fee Table (please complete)                     | # of Machines |             |  | License Fee   |           |            |
| License Fee:  | 1             | x\$50.00 =  | \$50.00  | First machine@ \$50.00                              |           |            |
| \$50.00 for the first vending machine and \$10 for each |               | x\$10.00 =  |  | Each additional @\$10.00 ea                         | ach       |            |
| additional machine                                      |               | Total Fee = |  |   |           |            |

## DO NOT COMPLETE INFORMATION BELOW - FOR OFFICE USE ONLY

| Check #    | Check Date:    | Amount Received |
|------------|----------------|-----------------|
| Check Name | Penalty amount | Amount Due      |

<sup>\*</sup>Complete reverse side of application

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## **Vending Machine Operator's License**

Iowa law exempts vending machines that dispense only prepackaged non-hazardous foods from obtaining a license. Vending machines that require a license are those dispensing the following items:

- "Non-prepackaged foods" which include post and pre-mix machines dispensing such items as coffee, soft drinks, soups, and similar items in cups; and
- "Potentially hazardous foods" which are food products that must be stored at 41°F or below, or 135°F or above

The operator shall maintain within the jurisdiction of the regulatory authority, a list of all vending machines and machine locations operated by the licensee, and shall make the list available to the regulatory authority upon request.

List the Number of Licensed Vending Machines by Location in each city, in the State of Iowa

| Name of Location | Address of Location | City | Number of<br>Machines |
|------------------|---------------------|------|-----------------------|
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| ŀ | \pp | licants Name (Print): | Applicants Signature: |
|---|-----|-----------------------|-----------------------|
|   |     |                       |                       |