



Susquehanna Township
1900 Linglestown Road
Harrisburg, PA 17110
717-545-4751
www.susquehannatwp.com

License #	
Date Paid	
Payment Type	

SUSQUEHANNA TOWNSHIP 2020 RETAIL FOOD FACILITY APPLICATION

A Retail Food Facility within Susquehanna Township must obtain a valid Food License. Licenses are valid through the 31st of December of each year. To receive your 2020 Food License, this form must be completed and returned to Susquehanna Township Office with the annual fee of \$200.00 no later than December 31, 2019. The application and a check or money order may be delivered in person or mailed to Susquehanna Township Building, 1900 Linglestown Rd., Harrisburg, PA. 17110. Checks should be made out to Susquehanna Township. Questions may be directed to Tony Russo, Health Officer at 717-805-9956 or via email at trusso@susquehannatwp.com.

PLEASE PRINT

Check one:

Renewal for existing facilities New Applicant Change of Owner

Name of Facility (Common Public Name) _____

Facility Street Address _____ City _____ State _____ Zip Code _____

() _____ () _____
Facility Phone Number _____ Facility Cell Number or Alternate Phone Number _____

Contact Name & Facility Email (Manager/Person in Charge) _____

Mailing Address (If other than above) _____

Attention _____

Business Name _____ Street Address _____ City/State _____ Zip Code _____

Owners name _____ Person in Charge (If not the Owner) _____

GREASE TRAP

Trap Size _____ gallons Pumping Company _____ Date Pumped _____

Copies of all pumping/cleaning reports are required to be submitted to the Township

(over)

ZONING AND OTHER CODES

Building Codes and Zoning: (check all that apply)

_____ Facility/Unit/Business is compliant with local zoning requirements.

_____ Facility/Structure is compliant with all building code requirements (electrical, plumbing, ventilation, structural, etc.)

Sales Tax: (check one)

_____ A license to collect sales tax has been obtained or applied for.

_____ According to the PA Dept. of Revenue, I have determined my business is exempt from sales tax.

Days and time of operation (put times in boxes)

Monday _____ Tuesday _____ Wednesday _____ Thursday _____

Friday _____ Saturday _____ Sunday _____

Anticipated date of opening for new facilities or change of ownership: _____

Signature

Date

<u>Application/Activity</u>	<u>FEES</u>	<u>Fee</u>
Public eating and drinking place		\$200 Annually
Itinerant public eating and drinking places		\$200 Annually
Second follow up inspection fee of food establishments		\$150
Third or subsequent follow up inspection fee		\$300
Courtesy inspection fee		\$150