Referral for Food Service Operation

TO: Karen Draper, Senior Sanitarian, Health Department

FROM: Permit Desk, Department of Buildings & Inspections

Address of Operation: _____

Name of Operation: _____

Contact Person: _____

Phone Number: (_____) _____

This referral is notifying the Health Department that a permit application has been made for work that involves a food operation including the service, preparation and storage of food.

Permit applicants should contact Karen Draper or Virginia Meachan at (513) 352-2908 to determine the reviews and inspections required by the Health Department. Consultations at their offices at 1525 Elm Street, 3rd floor, are by appointment to insure that the appropriate staff permit is available.