

Office Use Only

Date Received _____ Amt \$ _____ Check # _____

Received By _____ Receipt # _____



Austin/Travis County Health & Human Services Department
Public Health & Community Services Division
Environmental & Consumer Health Unit
RBJ Health Center, 4th floor •15 Waller St, Austin, TX 78702
Phone (512) 972-5600 Fax (512) 972-5630
www.ci.austin.tx.us/health/ech_main.htm



Request for Change of Ownership Inspection of a Food Enterprise

\$95 Inspection Fee for each inspection conducted.

A change of ownership inspection is required of all food enterprises before an operating permit can be approved. If an establishment has or will change ownership an inspection must be done to verify the new operation has adequate facilities or to verify if any existing equipment must be replaced or upgraded. §229.171(g)(6) of the Texas Food Establishment Rules speaks of upgrade at the time of a change in ownership of the establishment.

Fee payable to Austin-Travis County Health and Human Services Department (ATCHHSD) located at Environmental & Consumer Health Unit • RBJ Health Center, 4th floor •15 Waller St, Austin, TX 78702

Contact Person: _____ Phone # _____

Name of Owner: _____ Phone # _____

Name of Establishment: The Kitchen Space

Address: 1204 Cedar Ave Austin TX 78702
Street City State Zip

Establishment Sales Tax Permit #: _____

Establishment Information:

___ Food Service ___ Retail Food Store ___ Food Processor ___ Food Warehouse

Square Footage: 2,100 Number of Seats n/a Total number of Staff n/a Maximum working per shift n/a

Potable Water Provider City of Austin Wastewater Disposal Provider City of Austin

Type of Food: (attach menu) n/a

Projected opening date Currently open

- An additional fee of \$100 is charged for an inspection outside of normal working hours.
- Inspections will not be conducted until fees have been paid and this form has been completed.