OFFICE USE	Amount \$	Check #	Date Received:	Audit Findings
ONLY:	Rcvd By:	_ ROW ID		



Establishment Name:

AUSTIN/TRAVIS COUNTY HEALTH AND HUMAN SERVICES DEPARTMENT PUBLIC HEALTH AND COMMUNITY SERVICES DIVISION

Environmental and Consumer Health Unit

PO BOX 1088, Austin, TX 78767 Telephone: (512) 978-0300 Fax: (512) 978-0322



Food Manager (FM)/Food Handler (FH) Employee List

Applies ONLY to locations within the CITY OF AUSTIN

NOTICE: Compliant Employee List submitted after permit renewal must include \$100 compliance verification fee.

Noncompliant FM/FH list will be returned. All COA Food Enterprises must be 100% Food Handler compliant. All employees must be listed, regardless of food handler status. FM/FH employee must be registered with the City of Austin. Number of employees will be verified against number of employees listed at the time of permit renewal and at the last inspection. Please confirm status of COA registrations by obtaining copy of registration that states "City of Austin" &/or "COA". Confirm registration at COA FH Verification site: http://www.ci.austin.tx.us/health/fh/report.cfm to determine compliance BEFORE submitting employee list.

Failure to meet Food Handler Compliance Requirements may result in additional fees & possible legal action.

For information/overview of FH Compliance Requirements visit http://www.austintexas.gov/health/commercial_food_handler.htm or contact COA ECHU at (512) 978-0300.

Permit No.:

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1. Identify your Establishment. Complete all blanks. All information should be listed as it appears on your permit or permit renewal notice. Please print clearly.

Establishment Address:					Suite/Unit: Austin, TX Zip Code:			
teers/contractors at this estab	I certify the information on this list (and all attached pages) is current and correct to the best of my knowledge: X							
mation. Use this spreadshe	eet or attach your ow	n including all re	quested information	on. Additional copie	es available online	e or in our office.		
Last Name	Date of Birth	(Circle One)			Expiration Date	Job Title		
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