



345 6th Street, Suite 300
Bremerton, WA 98337
360-728-2235

FOOD ESTABLISHMENT PRE-APPLICATION MEETING REQUEST

Food & Living Environment/Drinking Water & Onsite Sewage

SUBMITTAL DATE	MEMO NUMBER

APPLICANT INFORMATION			
<i>First name</i>	<i>Last name</i>	<i>Contact phone</i>	<i>Email address</i>
<i>Mailing street address</i>		<i>City</i>	<i>State</i> <i>Zip code</i>
<i>Proposed food establishment name</i>			
<i>Food establishment street address</i>		<i>City</i>	<i>State</i> <i>Zip code</i>
SYNOPSIS OF PROJECT (ATTACH ADDITIONAL PAGES IF NEEDED)			
<i>Include a proposed menu, business plan, expected number of meals to be served daily, expected number of employees, expected floor plan, and any other pertinent information.</i>			
MEETING TIMES (CHOOSE ONE):			
Please choose an option. The in-person meeting will occur the following week at the chosen time.			Number of attendees: _____
<input type="checkbox"/> Tuesday at 9-10 am at KPHD <input type="checkbox"/> Friday at 10-11 am at KPHD			
CERTIFICATION			
<i>By signing this request, I certify that the information contained within is true and accurate to the best of my knowledge.</i>			
<i>Signature</i>			<i>Date</i>