

NEBRASKA DEPARTMENT OF AGRICULTURE

FOOD SAFETY PROGRAM

Request for Permit

Please complete the following Request for Permit electronically and email the completed file to agr.foodsafety@nebraska.gov with the subject line "Request for Permit". Our food safety team will reach out to schedule your inspection OR request additional information within 30 days.

Please allow a minimum of 30 days between application submission and date of inspection. If required, floor plan reviews may take an additional 30 days to complete BEFORE inspection.

Food permits are non-transferable to any other person or location. Any permit issued lapses automatically upon change of ownership or location.

Permits are to be renewed by August 1 of each year, regardless of when the permit was obtained. The director shall set the initial permit fee and the annual fees on or before July 1 of each fiscal year. The Director may raise or lower the fees each year. Fees can be found in the Nebraska Pure Food Act. Click here to view frequently asked questions (FAQs) regarding the Food Establishment Fee.

Please view our resources page for requirements and additional information.

Establishment Information

Establishment Name:				
Address:	City:	County:	State:	Zip:
Commissary Address (or N/A):	City:	County:	State:	Zip:
Owner Name:		Type of Entity:		
Address:	City:	County:	State:	Zip:
Phone number:				
Email:				
Planned opening date:				
Hours of Operation				
		☐ Check here if operation is open seasonally/intermitten		
		If so, what date range will the establishment be open		
		for?		

and tested at least annually ar	nd as required by state water quality regulations.
Water Source:	Water heater size:
Food Trucks/ Mobile F	ood Units Only:
Planned method of wastewate	er disposal:
Fresh water tank size:	
Waste water tank size:	
Specialized Processin	g (if applicable) 8-201.13; When a HACCP Plan is Required
 □ Packaging time/temperature □ Smoking food as a method □ Curing food □ Using food additives or add □ Operating a molluscan shell 	s performing any of the following activities: e control for safety food using a reduced oxygen packaging of preservation ling components such as vinegar as a method of preservation lifish life support system display tank for human consumption s that are for personal use as food
Floor Plan Review Not	tification (*Information Needed for a Plan Review)
	conversion to, or remodeling of a food establishment, food processing plant, or salvage as and specifications for such construction, conversion, or remodeling shall be rity for review and approval.
Type of Establishment:	
Operations Summary	(Please attach a FULL MENU to your Request for Permit.)
Please choose the method of	of sale and describe the type of food establishment you intend to operate:

Water Requirements 5-102.13; Water from a nonpublic water system (private well) shall be sampled

Change of Operation Notification Notice to all applicants

By typing my name, I attest that the information contained herein, including any supplemental documentation attached to this document for the submission process, is accurate for my intended operations. I understand that any changes to my business model or facility operations may necessitate additional facility and/or equipment requirements. I will notify the Nebraska Department of Agriculture prior to beginning any change of operation not disclosed in this form, so the facility and/or equipment requirements can be reassessed to ensure continued compliance with the Department's regulations.

Printed Name	 Date

At the time of your inspection, an NDA inspector will require the following information to complete your application:

- 1. Applicant's full name
- 2. Mailing address
- 3. Names and addresses of any partners, members, or corporate officers
- 4. Name and address of the person authorized by the applicant to receive the notices and orders of the Department as provided in the Nebraska Pure Food Act
- 5. Whether the applicant is an individual, partnership, LLC, corporation, or other legal entity
 - a. Proof of citizenship/alien registration (USCIS) may be requested.
- 6. Location and type of proposed establishment or operation
- 7. Signature of the applicant