

Request for Permit

Please complete the following Request for Permit and email 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: _____

Establishment Address: _____ City: _____ State: _____ Zip: _____

Owner Name: _____

Owner Address: _____ City: _____ State: _____ Zip: _____

Phone number: _____

Email: _____

Planned opening date: _____

Anticipated sales/meals per week _____

Hours of Operation

M: _____

T: _____

W: _____

TH: _____

F: _____

S: _____

S: _____

Check here if operation is open seasonally/intermittent

If so, what date range will the establishment be open for? _____

If operation is a food truck/mobile food unit:

Do you plan to operate in Douglas, Lancaster, or Hall County? Yes No

Planned method of wastewater disposal:

Water Source: Public Private Well

Business Type:

- Retail (All sales to final consumer)
- Wholesale (All sales to other businesses)
- Wholesale + Retail on Same Premises

Food Handling Activities (select all that apply)

Please attach a FULL MENU to your Request for Permit.

Pre-packaged Food Only	<input type="checkbox"/>
Alcohol Sales	<input type="checkbox"/>
Customer Self-service or buffet	<input type="checkbox"/>
Cold Holding	<input type="checkbox"/>
Cooking and/or hot holding	<input type="checkbox"/>
Cooling and reheating	<input type="checkbox"/>
Catering (served off-site)	<input type="checkbox"/>

Offering animal products raw or undercooked	<input type="checkbox"/>
Meat Market*	<input type="checkbox"/>
*Custom Processing? <input type="checkbox"/>	
Seafood Market	<input type="checkbox"/>
Deli Department	<input type="checkbox"/>
Sushi	<input type="checkbox"/>
Time as Public Health Control	<input type="checkbox"/>

Food and Specialized Processing (check all that apply)

**Specialized processes may require facility to complete a variance application and develop a HACCP plan. A member of our food safety team will contact you with further instructions if additional information is required.*

Category	Retail	Wholesale
Reduced Oxygen (Vacuum) Packaging	<input type="checkbox"/>	<input type="checkbox"/>
Freeze Drying	<input type="checkbox"/>	<input type="checkbox"/>
Smoked or Cured Meat	<input type="checkbox"/>	<input type="checkbox"/>
Production of Alcoholic Beverages	<input type="checkbox"/>	<input type="checkbox"/>
Low Acid/Acidified Food Processing (e.g. canned/jarred foods)	<input type="checkbox"/>	<input type="checkbox"/>
Jams/Jellies/Fruit Spreads	<input type="checkbox"/>	<input type="checkbox"/>
Repacking from Bulk Quantities	<input type="checkbox"/>	<input type="checkbox"/>
Fruit/Vegetable Juice Processing	<input type="checkbox"/>	<input type="checkbox"/>
Bottled Water Production	<input type="checkbox"/>	<input type="checkbox"/>
Seafood: Processing/Sushi/Smoked Fish	<input type="checkbox"/>	<input type="checkbox"/>
Molluscan Shellfish & Clams	<input type="checkbox"/>	<input type="checkbox"/>

Operations Summary *Please summarize the type of food establishment you intend to operate:*

Floor Plan Review

81-2,267: Prior to construction of, conversion to, or remodeling of a food establishment, food processing plant, or salvage operation, properly prepared plans and specifications for such construction, conversion, or remodeling shall be submitted to the regulatory authority for review and approval.

- Food Truck New Build Renovation Existing Establishment

If you have selected food truck, new build, or renovation, please attach floor plans to your request.

***Information Needed for a Plan Review**

Describe the renovation, if any:

Change of Operation Notification *Notice to all applicants*

By signing this form, 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.

E-Signature of Applicant

Date

Printed Name

Title of Applicant