

Contact:

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Health Officer  
Building Inspection Office  
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Dover NH 03820  
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### City of Dover, New Hampshire

Permit application for: Food service establishments, Bakeries, food stores, night clubs/bars, prepackaged foods, catering, private clubs, mobile units, churches, and schools, temporary permits

NEW APPLICATION: \_\_\_\_\_ RENEWAL: \_\_\_\_\_ PREV. LIC. # \_\_\_\_\_  
(OFFICE USE)

ESTABLISHMENT NAME: \_\_\_\_\_

ESTABLISHMENT OWNER: \_\_\_\_\_

ESTABLISHMENT ADDRESS: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

BUILDING OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #s (establishment) \_\_\_\_\_ (owner) \_\_\_\_\_ (other) \_\_\_\_\_

HOURS OF OPERATION: (mon-fri) \_\_\_\_\_  
(sat-sun) \_\_\_\_\_

MOBILE-UNIT / VENDOR, LOCATION / STOPS & TIMES \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

VEHICLE REGISTRATION: \_\_\_\_\_

TYPE OF ESTABLISHMENT: \_\_\_\_\_

NON-PROFIT: \_\_\_\_\_

TOTAL SEATING CAPACITY (including lounge, inside and outside seating) \_\_\_\_\_

\*Any food establishment license/permit granted under this application is expressly conditional upon continued adherence to all state and local laws and regulations including land use regulations, relating to the operation of the permitted establishment. Any license/permit granted hereunder may be suspended or revoked for violation of any such laws or regulations. Repeated critical violations shall be reason for review of this license/permit issued under this application by the board of health.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

UNDER REVIEW: \_\_\_\_\_ APPROVED: \_\_\_\_\_