

*FOR OFFICE USE*

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AUSTIN/TRAVIS COUNTY HEALTH & HUMAN SERVICES DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES DIVISION

P.O. BOX 142529 Austin, TX 78714  
Phone: (512) 978-0300 Email: [ehsd.service@austintexas.gov](mailto:ehsd.service@austintexas.gov)  
Web Address: <http://www.austintexas.gov/ehsd>



**Walk-in Location:** 1520 Rutherford LN, NE corner of Rutherford LN @ Cameron RD, Building 1 East Entrance (Not a Mailing Address)

**Food Manager Registration**  
*Initial Registration or Card Replacement*

**Applicant Information** *Print the registrant's name exactly as it appears on the Government Issued Photo ID supplied with the application.*

<b>Applicant:</b>	_____		
	Last Name	First Name	Middle Name
<b>Photo ID:</b>	_____		
	Photo ID Number	Type of Government Issued Photo ID Submitted (Example: Driver's License, Passport, State ID)	
<b>Home Address:</b>	_____		
	Street	City	State Zip Code
<b>Mailing Address:</b>	_____		
	Street	City	State Zip Code
<b>Email Address:</b>	_____		<b>Phone Number:</b> _____
	<i>Email addresses will not be distributed. (Internal use only)</i>		<i>(###) ### - ####</i>
<b>Date of Birth:</b>	_____		
	<i>MM/DD/YYYY</i>		

**Please Check One of the Following** *(Note: Incomplete applications will not be processed and will be returned.)*

\_\_\_\_\_ **Registration Only:** I am certified through a nationally accredited Food Manager education/training program and need to register my certificate with the City of Austin. *This Austin Food Manager Registration will be valid for one (1) year or until the date of expiration listed on the card/certificate submitted, whichever comes first.*

Enclosed are the following:

- 1) **\$28.00** Registration Fee
- 2) A copy of my **Food Manager** certificate from: \_\_\_\_\_
- 3) A copy of my current Government Issued Photo ID

\_\_\_\_\_ **Replacement:** I have lost my Food Manager Registration and need a replacement copy.

Enclosed are the following:

- 1) **\$14.00** for a replacement copy of my City of Austin Food Manager registration
- 2) A copy of my current Government Issued Photo ID

**DO NOT MAIL CASH PAYMENTS**

**Payment Forms Accepted: Cash, Check, Money Order, Visa, MasterCard, Discover, AMEX**  
Make checks and money orders payable to: ATCHD or Austin/Travis County Health & Human Services  
Debit cards not accepted. Credit cards not accepted for Travis County payments.

Payment must accompany applications submitted by mail (Environmental Health Services Division, PO BOX 142529, Austin, TX 78714) or in person at the walk-in location (1520 Rutherford LN). For customers submitting via email ([ehsd.service@austintexas.gov](mailto:ehsd.service@austintexas.gov)) please note that an EHSD representative will contact you by phone to collect a credit card payment within 2 business days of submission.

Applicant's Signature

Print Name

Date

I acknowledge that all information supplied above is true and correct to the best of my knowledge and belief. I further acknowledge that the aforementioned registration will be conducted in accordance with all applicable provisions of the orders and ordinances of Austin & Travis County, and all of the provisions of the codes, statutes and rules adopted under the codes and statutes of the State of Texas.