

CITY OF UNIVERSAL CITY
2150 UNIVERSAL CITY BLVD
UNIVERSAL CITY, TX 78148 (210) 659-0333

**APPLICATION FOR FOOD/BEVERAGE ESTABLISHMENT
 & OTHER HEALTH LICENSES**

New Renewal (License No: _____) Name Change Change of Ownership

Corporate/Owner Name _____

Corporate/Owner Address _____

City _____ State _____ Zip Code _____ Phone _____

Name of Universal City (UC) Establishment _____

UC Address _____ UC Business Phone _____

Email _____ No. of Employees (including Proprietor) _____

Type of Business _____

Where do you prefer permit renewal applications to be sent? Please check one:

Corporate Office Address or Local Business Address (UC)

*I certify the information above is correct to the best of my knowledge and understand that food/beverage licenses are **not** transferable. Should any information change regarding ownership, type of establishment, name of establishment or location of establishment, I will immediately notify the Development Services/Health to apply for a revised license.*

Signature of Applicant

Date

Please enclose a check or money order IN THE TOTAL AMOUNT DUE payable to the CITY OF UNIVERSAL CITY. * DO NOT INCLUDE THE AMOUNT DUE WITH ANY OTHER PAYMENT TO THE CITY. THIS PERMIT SHALL BE PAID SEPARATELY *** For questions, call (210) 659-0333 ext 727.**

Annual Food & Beverage License Fees:

Retail Only* \$ 125.00
 1-6 employees \$ 220.00
 7-10 employees \$ 320.00
 11-20 employees \$ 450.00
 21+ employees \$ 750.00

Other Health License Fees:

Nonprofit Concessions \$ 50.00
 Family/Group Daycare Service \$ 50.00
 Commercial Daycare Services \$ 120.00
 Foster Care \$ 50.00

TOTAL DUE: \$ _____

***Retail Only** Facilities: This classification is for establishments that sell **only** pre-packaged, non-potentially hazardous foods and do **not** conduct any onsite food preparation of foods and drinks.



FOR OFFICE USE ONLY

Fee Paid _____ Check/Cash/Credit Card Approved for Issuance _____ Date _____ Permit No _____