

Vigo County Health Department
147 Oak Street, Terre Haute, Indiana 47807
812-462-3281 Attn: Tiffany
2023 Vendor Application

Application for Operating Permit for Food and Beverage Machines.
We accept cash, check, cashier's check and money orders ONLY.

Vendor:

Name of Vendor: _____

Address: _____

City, State, Zip Code: _____

Phone: () _____

Name and Phone Number of Manager: _____

Owner's Information:

Owner's Name: _____

Address: _____

City, State, Zip Code: _____

Home Phone: () _____ Cell: () _____

Email Address: _____

Where would you like your application mailed to next year?

Name: _____

Address: _____

City, State, Zip Code: _____

Please continue filling out the other side of this application.

For Health Dept Use Only: