2021 Application for a License to Conduct a Vending Machine Location

Instructions:

- 1. Complete the applicable section. (Make any corrections, if necessary.)
- 2. Sign and date the application.
- 3. Make a check or money order payable to: "CCCHD"
- 4. Return check and signed application to: CLARK COUNTY COMBINED HEALTH DISTRICT

FOOD PROGRAM Springfield, OH 45503

ON RENEWAL APPLICATIONS ONLY—THERE IS A MANDATORY PENALTY FEE OF 25% OF THE RENEWAL FEE FOR OPERATING A VENDING MACHINE LOCATION AFTER THE DEADLINE (CHAPTER 3717 OF THE OHIO REVISED CODE).

Before license application can be processed, the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in not issuing/renewing a license. This action is governed by Chapter 3717 of the Ohio Revised

Address						
City			State		Zip	
hone #	Fax #		E-mail Address			
)	()					
				LHD	Use Only	
Location Name Location A		n Address (includ	Address (include City and Zip)		License Number	
nereby certify that I am the lice	nse holder, or the a	authorized representati	ve of the vending mac	hine location(s) inc	licated above	
	The moraci, or the c				modica above.	
Signature			Date	1		
			<u> </u>		<u> </u>	
ensor to complete below cense Fee + Late F	ee (if Applicable)	+ State Amount	=Total Amount D	ue		
\$12.71	те (т	\$6.00		\$18.71 x Machines = \$		
olication approved for lic	ense and certifi	ied as required by	Chapter 3717 of the	he Ohio Revise	ed Code	
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