

2026 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
529 E. Home Road
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 Code.

| | | |
|-------------------------|-----------------------|----------------|
| Vending Company | | |
| Address | | |
| City | State | Zip |
| Phone # (____) _____ | Fax # (____) _____ | E-mail Address |

| LHD Use Only | | | |
|---------------|---|--------------|----------------|
| Location Name | Location Address (include City and Zip) | Audit Number | License Number |
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I hereby certify that I am the license holder, or the authorized representative, of the vending machine location(s) indicated above.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

Licensor to complete below

| | | | |
|-------------------------------|----------------------------|---------------------------------|--|
| License Fee \$15.29 | + Late Fee (if Applicable) | + State Amount \$6.00 | =Total Amount Due \$21.29 x ____ Machines = \$ _____ |
|-------------------------------|----------------------------|---------------------------------|--|

Application approved for license and certified as required by Chapter 3717 of the Ohio Revised Code.

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| By | Date | Page ____ of ____ |
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