



**MINISTRY OF HEALTH**  
**THE PUBLIC HEALTH ACT**  
*(Cap 242, Sect. 13)*

**APPLICATION FOR A PERMIT TO OPERATE FOOD BUSINESS DURING THE COVID-19 PANDEMIC**

**To the County Director, Public Health**

I hereby apply for a permit to operate food business during the COVID-19 pandemic

Name of applicant.....

Name of person, firm or company to be issued with permit.....

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Branch of the Business.....

Owner of the Premises.....

Plot No..... L.R. No.....

Physical Address.....

Telephone/Cellphone number.....

Email address.....

*Date*.....

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*Name and Signature of applicant*