



Skagit County Public Health
Environmental Health
Food & Living Environment
Food Establishment Permit Application

Office Use Only	
Est. ID: _____	INV#: _____
RCVD Date: _____	By: _____ \$ _____
EH Use Only	
<input type="checkbox"/> PWS ID: _____ Grp: <input type="checkbox"/> A <input type="checkbox"/> B	
<input type="checkbox"/> Additional areas, #: _____	

Fill out the application completely and submit with required attachments. See reverse for instructions and definitions.

Applications submitted without required documents may be rejected or assessed a late fee.

Payment	<input type="checkbox"/> Cash	<input type="checkbox"/> Check	<input type="checkbox"/> Money Order	<input type="checkbox"/> Card
	Cardholder Name & Phone			

Establishment	Establishment Name			
	Street Address			
	City, State, Zip			
	Mailing Address			
	City, State, Zip			
	Phone		Email	
Manager Name		Title		

Ownership	Owner Name			UBI			
	Phone			Email			
	Type	<input type="checkbox"/> Association	<input type="checkbox"/> Partnership	<input type="checkbox"/> Individual	<input type="checkbox"/> Corporation	<input type="checkbox"/> Other	

Hours	<input type="checkbox"/> Year-Round	<input type="checkbox"/> Seasonal	Season Open Date		Season Close Date		
		Mon	Tues	Weds	Thurs	Fri	Sat
	Open						
Close							

Septic	<input type="checkbox"/> N/A	Date Last Inspection		<input type="checkbox"/> Shared system, name:	
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Attachments	All Permits		Catering		Mobile Units	
	<input type="checkbox"/> Name, title, and address of all owners and/or officers		<input type="checkbox"/> Commissary Agreement		<input type="checkbox"/> Restroom Agreement	
	<input type="checkbox"/> Menu		<input type="checkbox"/> Catering menu		<input type="checkbox"/> Commissary Agreement/Waiver	
	<input type="checkbox"/> Floor plan				<input type="checkbox"/> List of service locations/route	

By signing this application, I attest that this application is complete and accurate. I agree to comply with the requirements of WAC 246-215 and SCC 12.36 and will permit the health officer or their agent to access the food establishment and review records and other information as required. I understand that permits are not transferrable between people or establishments and that all changes in operations must be approved in advance.

Signature		Date	
Print Name		Title	

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Food Establishment Annual Permit Fees		
Base Rates	2026	2027
Risk Level 1 (Fixed, Mobile, Independent Catering)	\$335	\$350
Risk Level 2 (Fixed, Mobile, Independent Catering)	\$535	\$585
Risk Level 3 (Fixed, Mobile, Independent Catering)	\$625	\$675
Surcharges	2026	2027
Additional area (each)	\$170	\$190
On-site Septic System	\$120	\$125
Catering (In addition to a fixed establishment permit)	\$170	\$190
Other	2026	2027
Commissary Kitchen	\$105	\$110
Late fee (≥30 days)	\$75	
Hourly Rate	\$130	\$135

Visit <https://www.skagitcounty.net/Departments/Health/feeschedule.htm> for the complete schedule of charges.

Definitions

Uniform Business Identifier (UBI): A nine-digit number that registers you with several state agencies and allows you to do business in Washington State.

- You may apply for a UBI by submitting a Business License Application through the Washington Department of Revenue at <https://dor.wa.gov/open-business>.

Catering operation: a person or business who contracts with a client to prepare a specific menu and amount of FOOD in an APPROVED FOOD ESTABLISHMENT for service to the client's guests or customers at a different location.

- Catering does not include "to-go" or "delivery" food service where the food establishment relinquishes prepared food to the client and does not prepare, serve, or otherwise handle food outside the approved food establishment.

Mobile food unit: a readily moveable food establishment. This may include a food truck, trailer, pushcart, or other portable unit.

Commissary: an APPROVED FOOD ESTABLISHMENT where FOOD is stored, prepared, portioned, or PACKAGED for service elsewhere.