

Madison County
REGULATORY LICENSING UNIT
SCHOOL FOOD ESTABLISHMENT INSPECTION APPLICATION
(Health and Safety Code, Chapter 437)
Return both the completed application and fee made payable to
Madison County in the envelope provided or mail to:
Madison County Food Safety Program, 101 W. Main Suite B-22, Madisonville, Texas 77864
You may contact our office at: (936) 349-5640
You may visit our website at: www.co.madison.tx.us

If you are not a school food establishment, contact this office at (936) 349-5640 for the correct application.

Name of Independent School District (ISD): _____

Mailing Address : _____

City, State, Zip Code: _____ County: _____

Telephone number at address: _____

Contact Person: _____

For additional locations, please attach additional sheet listing the following information:

Name of School to be Inspected: _____

Physical Address of School to be Inspected: _____

City, State, Zip Code: _____ County: _____

Telephone # of School to be Inspected: _____ TEA #: _____

Check all that apply: Breakfast Program Lunch Program

G SCHOOL INSPECTION FEE -- \$300.00 for EACH school (covers two inspections per year)

TOTAL FEE DUE: Number of Schools to be Inspected per year _____ x \$300.00 = \$ _____

VERIFICATION: I SWEAR OR AFFIRM THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT. I FURTHER CERTIFY BY SIGNATURE HEREON, THAT I AM AUTHORIZED TO EXECUTE THIS DOCUMENT. I FURTHER CERTIFY THAT I HAVE READ AND UNDERSTAND CHAPTER 437 OF THE HEALTH & SAFETY CODE, THE APPLICABLE PROVISIONS OF 25 TEXAS ADMINISTRATIVE CODE, CHAPTER 229, AND AGREE TO ABIDE BY THEM.

Signature _____

Date _____

Printed Name & Title _____

Revised March 25, 2025

APPLICATION AND FEE MUST BE SUBMITTED (POSTMARKED) BY SEPTEMBER 1ST