



UTAH COUNTY HEALTH DEPARTMENT

Joseph K. Miner, M.D., M.S.P.H.
Executive Director

Ralph L. Clegg, E.H.S., M.P.A.
Deputy Director

FOOD SAFETY MANAGER REGISTRATION FORM

Proof of completion of approved Food Safety Manager course must accompany this application.**

Name _____ Phone # _____

Address _____ City _____ ZIP _____

Place of Employment _____

Address of Employment _____

Name of State Approved Exam _____

Date of Exam _____

I hereby register for Food Safety Manager Certification to be issued in accordance with the regulations adopted by:

Environmental Health
151 S. University Avenue Suite 2600
Provo, UT 84601
801 851-7525
801 851-7521 (Fax)

Signature of Applicant

Date

**No fee required for 1st Food Safety Manager registered per establishment.
A \$15 fee is required for any additional Food Safety Managers registered

Payment Received By: _____

Payment Date: _____

Cash Check Credit/Debit