



CITY OF DECATUR, TEXAS

1601 S. State Street Bldg. C
Phone 940-393-0250 ★ Fax 940-626-4629 email: development@decaturtx.org

CFM/CPO Registration #: _____
Amount Paid: \$ _____
Received by: _____

CERTIFIED FOOD MANAGER OR CERTIFIED POOL OPERATOR REGISTRATION

<input type="checkbox"/>	Certified Food Manager - per calendar year / per cfm license * * Separate CFM Registration and fee required per Food Establishment	\$ 10.00
<input type="checkbox"/>	Certified Pool Operator - per calendar year	\$ 10.00

Registration Information (Please check the boxes that documentation has been included)

- Copy of Certified Food Manager's Certificate of Completion
- # # 7 U valid Government Issued Photo Id

Certificate of Completion & Valid Government Issued Photo Id Must be attached

- Registration is required annually
- Please notify our office of any change in:
 - Address
 - Telephone Number
 - Establishment/Facility your registration is assigned to changes

Information: (Click one)	<input type="checkbox"/> Certified Food Manager	<input type="checkbox"/> Certified Pool Operator
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Name: _____ Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Business Phone: _____ Cell: _____

Certificate Issued By: _____

Date of Issuance: _____ Expiration Date: _____

Establishment or Facilities License Holder is responsible for:

➤ Certified Pool Operators must provide a list of public pool/spa facilities in the City of Decatur

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Print Name of License Holder Signature Date