

Owen County Health Department  
751 E. Franklin St.  
Spencer, Indiana 47460  
Office: 812-829-5017 Fax:812-714-2900

## Home Based Vendor Registration Form

### Contact Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Business Name: \_\_\_\_\_

Products: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Certified Food Handler Information:

Indiana State Department of Health requires all home based vendors to obtain a food handler certificate from a certificate issuer that is accredited by the ANSI (IC 16-42-5.2)

Name on Certificate: \_\_\_\_\_

Certificate Number: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Expiration: \_\_\_\_\_

Copy Provided to the HD  yes  no

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Date Registered: \_\_\_\_\_ Received by: \_\_\_\_\_