DEPARTMENT OF HEALTH AND HUMAN SERVICES ENVIRONMENTAL HEALTH PROGRAM

155 North First Avenue, Suite 170, MS 5 Hillsboro, OR 97124 Telephone: (503) 846-8722 Email: HHSEHealth@washingtoncountyor.gov WashCoFoodSafety.com



LOCATION OF VENDING MACHINE UNITS

This information is required for issuance or renewal of a Vending Machine License.

Name of Vending Machine Company: _____

Date: _____

List below all requested information for your vending machine(s). Machine location information is confidential.

| | BUSINESS NAME | BUSINESS ADDRESS |
|--------------------------------|----------------------------|----------------------------|
| (hot drinks, sandwiches, etc.) | (where machine is located) | (where machine is located) |
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