



# Hays County Development Services

INSPECTION – SCHOOL

2171 Yarrington Rd, Suite 100, Kyle Texas 78640

(P)512-393-2150 (Email) [foodpermits@hayscountytexas.gov](mailto:foodpermits@hayscountytexas.gov)

Hays County does not permit non-profit schools. A school cafeteria that is run by a nonprofit organization and requires 2 inspections per year may apply for an inspection by filling out the below information. Payment instructions can be found on page 2. If there are more than 3 locations, please provide additional lists or sheets with the information that is outlined below. Submit this form to [foodpermits@hayscountytexas.gov](mailto:foodpermits@hayscountytexas.gov)

If you are not a nonprofit school contact the Hays County Development Services office at (512) 393-2150 x 2 for the correct application.

Name of ISD or organization if applicable: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Telephone Number at Above Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

Name of School to be Inspected: \_\_\_\_\_

Physical Address of School to be Inspected: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Please Identify the Semester(s) This Request is For: ☐ Spring ☐ Fall

Telephone Number of School: \_\_\_\_\_

Check all that apply: ☐ Breakfast Program ☐ Lunch Program ☐ Other

Name of School to be Inspected: \_\_\_\_\_

Physical Address of School to be Inspected: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Please Identify the Semester(s) This Request is For: ☐ Spring ☐ Fall

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City, State, Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Please Identify the Semester(s) This Request is For: ☐ Spring ☐ Fall

Telephone Number of School: \_\_\_\_\_

Check all that apply: ☐ Breakfast Program ☐ Lunch Program ☐ Other

**APPLICATION AND FEE MUST BE SUBMITTED BETWEEN SEPTEMBER 1<sup>ST</sup> AND OCTOBER 31<sup>ST</sup> FOR FALL SEMESTER INSPECTIONS AND BETWEEN DECEMBER 1<sup>ST</sup> AND JANUARY 31<sup>ST</sup> FOR THE SPRING SEMESTER.**

**SCHOOL INSPECTION FEE -- \$150.00 per school inspection/per semester**

**TOTAL FEE DUE: Number of Schools to be Inspected per Spring Semester** \_\_\_\_\_ x **\$150.00** = **\$** \_\_\_\_\_

**TOTAL FEE DUE: Number of Schools to be Inspected per Fall Semester** \_\_\_\_\_ x **\$150.00** = **\$** \_\_\_\_\_

To be consistent with the Texas Department of State Health Services, Hays County will assess a \$150 fee for each inspection.

To see information from The Texas Department of State Health Services please visit  
<https://www.dshs.texas.gov/retail-food-establishments/permitting-information-retail-food-establishments#School%20Food%20Establishments>

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Representative Title

By signing, I hereby certify all the information is true and accurate. I attest all schools will follow all local, state, and federal laws, including but not limited to Texas Health & Safety Code, Chapter 437

- ⇒ To make an online payment, please visit [www.certifiedpayments.net](http://www.certifiedpayments.net)
- ⇒ Use Bureau Code "4963827" to link your payment with Hays County Development Services. Then select "Begin Payment". Then select "Continue".

**NEED TO MAKE A PAYMENT?**

Enter the bureau code printed on your bill or information that you received from the government agency below.

If you are unable to locate the bureau code, please contact the government agency.

Bureau Code

BEGIN PAYMENT

- ⇒ Enter the "Payment Amount". Enter the application number, permit number, or address of the application under the "Permit or Bill Number" field.
- ⇒ Next select the payment method, card type, fee / payment description

**HAYS COUNTY, TX DEVELOPMENT SERVICES**

**PERMITS AND FEES**

Payment Amount Permit or Bill Number

Payment Amount Permit or Bill Number

Add Another Payment

Select the method you would like to use to submit this payment.

Payment Method ☒ Bank Card ☐ Electronic Check

Card Type

Please select from the following

Day Care

Cancel

Back

Continue

- ⇒ Follow all instructions / prompts to complete the payment. Enter the cardholder's information followed by the billing information, and card number.
- ⇒ You will receive an electronic receipt / confirmation once the payment has been processed.
- ⇒ Please note, a convenience fee will be charged for each transaction.

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