



**MANITOWOC COUNTY  
HEALTH DEPARTMENT**

**License, Permit or Registration**

The person, firm, or corporation whose name appears on this certificate has complied with the provisions of the Wisconsin statutes and is here by authorized to engage in the activity as indicated below.

ACTIVITY	EXPIRATION DATE	I.D. NUMBER
<b>Retail Food - Not Serving Meals, Simple - Simple Non-TCS</b>	30-Jun-2023	SCHE-CNCPYV
LICENSEE MAILING ADDRESS	NOT TRANSFERABLE	BUSINESS / ESTABLISHMENT ADDRESS
LAURA HETLAND		HONEY HUNTRESS
PO BOX 74		212 CHURCH ST
KIEL WI 53042		SAINT NAZIANZ WI 54232

All Permits expire on June 30th

If you do not receive a renewal form prior to June 30th from your licensing authority, you should send in your payment for renewing your permit to the following address:

MANITOWOC COUNTY HEALTH DEPARTMENT  
1028 S 9TH ST  
MANITOWOC, WI 54220  
(920)683-4155

\* Include the name of your facility and the ID number.

