



**TULARE COUNTY  
HEALTH & HUMAN SERVICES AGENCY**

Jason T. Britt, M.S.  
Agency Director

Public Health Branch

**FOOD FACILITY VOLUNTARY CLOSURE MEMO**

Today's Date: \_\_\_\_\_

From: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

To: Tulare County Environmental Health Services Division  
Address: 5957 S. Mooney Blvd. Visalia, CA 93277 (second floor)  
Phone: 559-624-7400 Fax: 559-733-6932

DBA/Business Name: \_\_\_\_\_

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

Date of Closure: \_\_\_\_\_

Phone Number: \_\_\_\_\_

The above facility has voluntarily closed due to:

- \_\_\_\_\_ No Electricity
- \_\_\_\_\_ No Refrigeration
- \_\_\_\_\_ No Water
- \_\_\_\_\_ No Hot Water
- \_\_\_\_\_ Fire
- \_\_\_\_\_ Severe Vermin Infestation
- \_\_\_\_\_ Sewage Overflow
- \_\_\_\_\_ Any Other Imminent Health Hazards (State Reason):

\_\_\_\_\_  
\_\_\_\_\_

This facility will be closed from \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m.

As the owner/person in charge of this food facility, I will correct the imminent health hazards listed above before reopening or resuming normal business operation. I understand that failure to correct the imminent health hazards above may result in permit suspension or revocation by Tulare County Environmental Health Services Division. I will notify Tulare County Environmental Health Services Division before reopening by fax at 559-733-6932.

Signature of Owner/ Person in Charge: \_\_\_\_\_ Date: \_\_\_\_\_