



**REGISTRATION APPLICATION FOR
MANUFACTURER, PROCESSOR, REPACKAGER,
OR WHOLESALE DISTRIBUTOR OF FOOD, DRUGS, OR COSMETICS**

State Form 13054 (R7 / 6-17)
Indiana State Department of Health
Food Protection Program

The following information is required in accordance with Indiana Code (IC) 16-42-1-6:

Registration of manufacturer, processor, repackager, or wholesale distributor; maintaining place of business in state Sec. 6. (a) A manufacturer, processor, repackager, or wholesale distributor of food, drugs, or cosmetics who maintains a place of business in Indiana shall file with the state department, upon forms to be furnished by the state department, a written statement of the name and address of the owner, the character of the business, and the business address of each place of business in Indiana. (b) A new place of business for the manufacture, processing, repacking, or wholesale distribution of food, drugs, or cosmetics may not be established in Indiana until the place of business has been registered as provided in this chapter. (c) If ownership of a registered place of business changes, the new owner shall reregister the place of business before operating the same.

New Registration: _____
Estimated Start Date (month, day, year) Estimated Hours of Operation Estimated Facility Square Footage

Change of Owner

Change of Address

Date (month, day, year): May 28, 2019

Legal Name of Establishment: BooYAH! Shrubs LLC

Doing Business As (DBA): BooYAH! Shrubs E-mail: rene@blossombeauty.us

Business Telephone: 3056328647 Mobile Telephone: 3056328647 Other: 3177534812 Fax: () -

Physical Address: 2628 Shelby Street Indianapolis, IN 46203 (Food Beauty Center)
Street City County ZIP Code

Mailing Address: 6060 Gladden Drive Indianapolis, IN 46220
Street City County ZIP Code

Owner Name: Rene & Chris Walczak

Mailing Address: 6060 Gladden Drive Indianapolis, IN 46220
Street City County ZIP Code

Type of Business and Products: (Check the appropriate type(s) and list the food products.):

Manufacturer / Processor Repackager Warehouse/Distributor Other: _____

Products: Shrub syrups, drinking vinegars

Utilities (Check the appropriate): Water: Public Private
 Sewage: Public Private

List any other affiliated off-site storage or manufacturing location(s). Use back of form if additional space is needed.

2628 Shelby Street Indianapolis, IN 46203
Name Street City County ZIP Code

I (the applicant) agree to abide by the requirements contained in the Wholesale Food Establishment Sanitation Requirements Title 410 Indiana Administrative Code 7-21 and other applicable state and federal regulations.

Rene Walczak
Printed Applicant Name

Applicant Signature

President
Applicant Title

MAIL OR FAX COMPLETED FORM TO:
 INDIANA STATE DEPARTMENT OF HEALTH
 FOOD PROTECTION PROGRAM
 100 North Senate Avenue, Room N855
 Indianapolis, IN 46204
 Fax: (317) 233-9200

FOR OFFICE USE ONLY: REGISTRATION NUMBER: _____ RISK CATEGORY: _____