

# HAMILTON COUNTY HEALTH DEPARTMENT

Noblesville, Indiana

HEREBY ISSUES

## PERMIT and LICENSE

No. 4344

TO

**Name of Establishment:** Generations Pie

**Address:** 1025 W Main St.

Carmel IN 46032

**Phone:** 3176059568

**Name of Owner:** Maria and Michael Johnson , Maria and Michael

**For the purpose of operating a: Food Service**

In Hamilton County, Indiana according to terms of Hamilton County Ordinance 10-23-06-A as adopted on November 13, 2006.

**Duration of Permit :** Permit Expires Dec. 31, 2022

**Revocation of Permit :** Permit may be revoked by Hamilton County Health Officer upon violation by the holder of any of the terms of the above Ordinances.

**Transfer of Permit Prohibited :** Permit shall not be sold, assigned, loaned or transferred to any other owner or business location.

Permit Fees are NOT transferable or refundable

Seal



*Charles Harris, MD*

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HEALTH OFFICER  
HAMILTON COUNTY HEALTH DEPARTMENT

# HAMILTON COUNTY HEALTH DEPARTMENT

Noblesville, Indiana

HEREBY ISSUES

## PERMIT and LICENSE

No. 4384

TO

**Name of Establishment:** Generations Pie

**Address:** 1025 W Main St.

Carmel IN 46032

**Phone:** 3176059568

**Name of Owner:** Maria and Michael Johnson , Maria and Michael

**For the purpose of operating a:** Annual - Temporary

In Hamilton County, Indiana according to terms of Hamilton County Ordinance 10-23-06-A as adopted on November 13, 2006.

**Duration of Permit :** Permit Expires Dec. 31, 2022

**Revocation of Permit :** Permit may be revoked by Hamilton County Health Officer upon violation by the holder of any of the terms of the above Ordinances.

**Transfer of Permit Prohibited :** Permit shall not be sold, assigned, loaned or transferred to any other owner or business location.

Permit Fees are NOT transferable or refundable

Seal



*Charles Harris, MD*

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HEALTH OFFICER  
HAMILTON COUNTY HEALTH DEPARTMENT

# HAMILTON COUNTY HEALTH DEPARTMENT

Noblesville, Indiana

HEREBY ISSUES

## PERMIT and LICENSE

No. 4443

TO

**Name of Establishment:** Generations Pie  
**Address:** 1025 W Main St.  
Carmel IN 46032  
**Phone:** 3176059568

**Name of Owner:** Maria and Michael Johnson , Maria and Michael

**For the purpose of operating a:** Annual - Temporary

In Hamilton County, Indiana according to terms of Hamilton County Ordinance 10-23-06-A as adopted on November 13, 2006.

**Duration of Permit :** Permit Expires Dec. 31, 2022

**Revocation of Permit :** Permit may be revoked by Hamilton County Health Officer upon violation by the holder of any of the terms of the above Ordinances.

**Transfer of Permit Prohibited :** Permit shall not be sold, assigned, loaned or transferred to any other owner or business location.

Permit Fees are NOT transferable or refundable

Seal

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