

STATE OF NEVADA
 DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
 COMMUNITY SERVICES
 ENVIRONMENTAL HEALTH SECTION
www.dpbh.nv.gov
APPLICATION FOR A LABEL REVIEW



Check One:

- Bottled Water Distributor
 Food Retail/Processing Establishment
 Dietary Supplements
 Certificate of Free Sale
 Cosmetics Manufacturer
 Drugs Manufacturer

Applicant Information

Applicant's Name	
Name of Establishment	
Address	
Phone	
E-mail Address	

Company Name of the Product

Contact Name	
Name of Distributor	
Address	
Phone	
E-mail Address	

Products to be Produced (Add additional pages if necessary)

Name of Food Product	Weight/Size	Has this label been FDA Approved
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

Instructions for label submission:

- 1) A complete set of original labels - including front, back and any other labels affixed to the container.
- 2) Label must be legible.
- 3) Attach labels to this application
- 4) Add additional pages if necessary for all labels to be reviewed.

Label Review Application Type

Fees

Bottled Water Distributor, Food Retail/Processing Establishment, Dietary Supplements, Cosmetics, Drugs	\$83.00
Labels that have been approved by the FDA or previously reviewed by the Environmental Health Section	No Fee

Signature of Applicant	Print Name	Date

FOR OFFICIAL USE ONLY

Fee:	Date Paid:	Check No.	Receipt No.
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Environmental Health Specialist Approval for Permit: (EHS Staff Must Review Application for Accuracy Prior to Submittal)

Signature..... Date