

# GO TEXAN Restaurant Program Application

## 1. BUSINESS TYPE (Mark one)

- Corporation
- Limited Liability Co.
- Limited Partnership
- General Partnership
- Sole Proprietorship
- Cooperative
- Other (specify) \_\_\_\_\_

## 2. APPLICANT INFORMATION

Full legal business name (owner's name if sole proprietor – no aliases)

D.B.A. (Restaurant Name)

**Company identification number:** Please provide ONE type of ID applicable to your business. Applications CANNOT be processed without this information.

- a) Texas Driver's License or State ID Number (provide if a Sole Proprietorship or an Individual exempt from state sales tax)
- b) Texas Comptroller Taxpayer Vendor ID Number (provide if your business collects state sales tax and is a general or limited partnership, limited liability company or a corporation)

Is this temporary? \_\_\_Yes \_\_\_No

- c) Federal Taxpayer ID Number or Employer ID Number (provide for out-of-state businesses or in-state groups, organizations and businesses exempt from state sales tax)

## 3. RESPONSIBLE OFFICER, PARTNER, MANAGER OR OWNER

Please list the full legal name (no aliases or nicknames) of the primary person responsible for the business, as indicated: For a corporation, limited liability company or cooperative, list the president or CEO; for a limited or general partnership, list the managing partner or general manager; for a sole proprietorship, list the owner; for any other type of business, list the general manager.

First Name ( )	M.I.	Last Name	
Phone No.	Ext.		
Address			
City	State	Zip	County
E-mail			

## 4. PERSON TO CONTACT FOR GO TEXAN-RELATED MATTERS

First Name	M.I.	Last Name	
Title ( )			
Phone No.	Ext.		
Address			
City	State	Zip	County
E-mail			

Would you prefer to be contacted by e-mail?  
\_\_\_Yes \_\_\_No

## 5. RESTAURANT INFORMATION

**Establishment Type** (Please choose one)

- Restaurant
- Bed and Breakfast

Facility address (physical street address of restaurant or EMS address for rural routes)

Address (No P.O. Box)

City State Zip County

Directions to physical location if address above is difficult to find: (If you own multiple locations, please list other addresses on a separate sheet.)

Phone Number

Web Site Address

**Cuisine Type** (Select all that apply)

- American
- Asian
- Contemporary
- Deli
- Desserts
- French
- Fusion
- Indian
- Italian
- Latin
- Mediterranean
- Mexican
- Seafood
- Southwestern
- Steak
- Tex-Mex
- Vegetarian
- Other \_\_\_\_\_

**6. VERIFICATION OF RESTAURANT ESTABLISHMENT: TO VERIFY THAT YOU ARE AN ESTABLISHED RESTAURANT IN THE STATE OF TEXAS, PLEASE ATTACH A COPY OF YOUR RESTAURANT HEALTH PERMIT OR PROVIDE THE PERMIT NUMBER \_\_\_\_\_ AND ISSUING GOVERNMENTAL ENTITY.**

Governmental Entity

Address

City State Zip County

**7. LIST THE TOP FIVE FRESH FOOD PRODUCTS YOU PURCHASE ON A MONTHLY BASIS.**

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

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## 8. LIST THE TOP FIVE MANUFACTURED OR PROCESSED FOOD PRODUCTS YOU PURCHASE ON A MONTHLY BASIS.

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

## 9. DOES YOUR RESTAURANT SERVE TEXAS WINES?

\_\_\_ Yes \_\_\_ No

If no, would you like information about Texas wines or a particular winery?

- \_\_\_ Yes, general information
- \_\_\_ Yes, a particular winery:

Winery Name \_\_\_\_\_

## 10. LIST THE FIVE FOOD PRODUCTS YOUR RESTAURANT PURCHASES ON A REGULAR BASIS THAT ARE MADE, PROCESSED, GROWN OR VALUE ADDED IN TEXAS.

(Need only one to qualify for GO TEXAN Restaurant Program membership.)

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_

## 11. LIST YOUR DISTRIBUTOR(S). (OPTIONAL)

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## 12. ARE YOU INTERESTED IN TEXAS-GROWN OR -PROCESSED ALTERNATIVES TO ANY FOOD PRODUCTS OR PRODUCE YOU CURRENTLY USE?

List these item(s) below to receive a GO TEXAN product listing near you:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## 13. DOES YOUR RESTAURANT ESTABLISHMENT CURRENTLY MANUFACTURE OR PROCESS FOOD PRODUCTS PACKAGED FOR RETAIL SALE?

\_\_\_ No \_\_\_ Yes

If yes, please note that to list your restaurant's food products as GO TEXAN, you must register them as a GO TEXAN product member and submit a separate application and pay another \$25 fee.

If yes, please list the products below:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## 14. PAYMENT – PLEASE INCLUDE MEMBERSHIP FEE OF \$25 AND RESTAURANT HEALTH PERMIT WITH YOUR COMPLETED APPLICATION. Members will be billed a renewal fee of \$25 approximately 45 days from membership expiration date each year. REGISTRATION IS NOT VALID UNTIL APPROVED BY TDA.

Payable to the Texas Department of Agriculture:

Check # \_\_\_\_\_

Cashier's Check # \_\_\_\_\_

Money Order # \_\_\_\_\_ Amount remitted \$ \_\_\_\_\_

## 15. SIGNATURE

The applicant shall comply with all applicable laws and regulations, and obtain all appropriate governmental approval pertaining to the selling, advertising, marketing, packaging, manufacturing or commercial handling of the products and/or operation of restaurants covered by the GO TEXAN certification mark.

Failure to observe appropriate standards of conduct, as specified in the GO TEXAN program rules 4 Texas Administrative Code, Part 1, Chapter 17, Subchapter C, may result in termination of Applicant's GO TEXAN membership. GO TEXAN members are responsible for the actions of their employees and agents in complying with the requirements for membership in the GO TEXAN program. TDA has sole authority to determine if the actions of a GO TEXAN member or its employees and agents are in keeping with the agreed upon requirements for membership and the GO TEXAN program rules.

TDA may use any photographic likeness and names of Applicant's principals, officers, employees, or any person in Applicant control, and its products, in its marketing materials and all other media. Applicant releases TDA and all other persons and associations from any and all claims and causes of action that Applicant, or persons employed by or controlled by Applicant, has or may have in the future relating to the presentation of photographs or likenesses in such marketing materials. The applicant, by and through personal or agent's signature below:

(1) certifies that all information provided in connection with this application at any time is true and correct to the best of the applicant's knowledge;

(2) acknowledges that any misrepresentation or false statement made by the applicant, or an authorized agent of the applicant, in connection with this application, whether intentional or not, will constitute grounds for denial, revocation, or non-renewal of any licenses issued pursuant to this application and/or assessment of monetary administrative penalties;

(3) if applying as an individual, further acknowledges that this application may be denied and that any license issued pursuant to this application may be suspended, revoked, or denied renewal due to delinquency in payment of a guaranteed student loan;

(4) certifies that under Section 231.006, Family Code, regarding delinquent child support, that the individual or business entity named in this application is not ineligible to receive any payment and acknowledges that this application may be terminated and payment pursuant to this application may be withheld if this certification is inaccurate;

(5) agrees to use the GO TEXAN mark in accordance with TDA's procedures for such use and understands that failure to adhere to the procedures may result in revocation of license to use GO TEXAN mark; and

(6) Application is signed by an agent (including employee) of the applicant, the person signing certifies that he or she is authorized to make the preceding certifications on behalf of the applicant.

Applicant Name \_\_\_\_\_

Title \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Date (month/day/year) \_\_\_\_\_

**Mail Application To:**

**Texas Department of Agriculture  
Marketing and Promotion Division  
P.O. Box 12076  
Austin, Texas 78711-2076**

**For questions, call 877-99GOTEX or e-mail [GOTEXAN@tda.state.tx.us](mailto:GOTEXAN@tda.state.tx.us).**