

SUBMIT THIS APPLICATION TWO WEEKS PRIOR TO THE EVENT

EVENT: _____

LOCATION OF EVENT: _____

DATES OF EVENT: _____ TIME OF FOOD PREP. _____ TIME OF FOOD SALE _____

NAME OF CONCESSION OR BOOTH: _____ # OF BOOTHS _____

APPLICANTS NAME: _____ PHONE #: _____ FAX #: _____

APPLICANTS ADDRESS: _____

Please list all foods to be served
Include how you plan to keep potentially hazardous foods, (meat, seafood, poultry, eggs, dairy items, cooked beans/rice/pasta). HOT (140 F+) or COLD (45F-) before and after cooking.

FOOD ITEM	OFF SITE PREP. YES OR NO	COOKING PROCEDURES (e.g.deep fry, grill, BBQ)	FOOD TEMPERTURE HOLDING METHOD

FACILITY NAME FOR OFFSITE PREP.: _____

ADDRESS: _____ OFFSITE PREP.PHONE #: _____

HANDWASHING FACILITIES

As a minimum, you need 5 gallon container with a spigot, a bucket for wastewater; pump soap, and paper towels. Plumbed sink may be required.

UTENSILS WASHING FACILITIES: ON SITE: OTHER:

As a minimum you need two 5 gallon buckets one with detergent/water and one with chlorine/water (1 TBS/gal.) Plumbed sinks may be required where there is extensive food preparation.

NO HOME FOOD PREPARATION OR STORAGE IS ALLOWED

I have read and understand and will comply with the Temporary Food Facility requirements.

Signature of Applicant _____ Date _____