



Environmental Health Division

Phone: (409) 832-7463 Fax: (409) 212-9589

License # _____

TEMPORARY FOOD ESTABLISHMENT PERMIT APPLICATION

Name of Sponsoring Organization: _____ Name on Booth: _____

Proposed Date of Operation: _____ thru _____

Address of Event: _____

Contact Person: _____ Phone Number(s): _____

Entertainment Provided?: YES or NO (circle one) Name & Type of Entertainment _____

Contact Name for Entertainment: _____ Phone Number(s): _____

Temporary permits issued on a consecutive basis must be in conjunction with the festival/event/entertainment. No consecutive temporary permits will be approved if no entertainment service provided. Applicants must obtain a food handler certification, prior to inspection date.

BOOTH SET UP TIME: _____

Type of Permit Requested (Check One):

1. _____ TEMPORARY FOOD ESTABLISHMENT

☞ Complete Middle Column on page 2 of this form

2. _____ SPECIAL EVENT FOOD ESTABLISHMENT (6 or more booths)

☞ Complete All Columns on page 2 of this form

Deadline for submission of application: no later than 1 week prior to event.

FEE:

CHECK APPROPRIATE FEE BELOW

PLEASE HAVE CORRECT CHANGE

TEMPORARY FOOD ESTABLISHMENT

\$33.00

DISCOUNT (IF APPLICABLE) Youth & Elderly

\$16.50

SPECIAL EVENT FOOD ESTABLISHMENT

\$220.00 PER DAY

Signature of Applicant: _____ Date: _____

Print Name: _____

OFFICE USE ONLY: DATE ISSUED: _____ / _____ / _____ EXPIRATION DATE: _____ / _____ / _____ APPROVED BY: _____ INPUT DATE: _____ CLERK'S INITIAL: _____

tdb 3-2016

"Promoting healthy lifestyles, preventing disease, and protecting the health of our community"

