



**TEMPORARY FOOD ESTABLISHMENT PERMIT APPLICATION**

- APPLICATIONS MUST BE SUBMITTED 3-30 DAYS PRIOR TO THE EVENT
- PERMIT FEE MUST BE PAID PRIOR TO EVENT. PERMITS WILL NOT BE ISSUED ON-SITE
- VENDORS WHO HAVE NOT OBTAINED A PERMIT PRIOR TO AN EVENT WILL BE ASKED TO LEAVE
- VENDORS WHO HAVE MORE THAN ONE BOOTH AT AN EVENT (NOT CONNECTED SIDE-BY-SIDE) MUST OBTAIN A PERMIT FOR EACH BOOTH

Facility/Business Name: \_\_\_\_\_

Menu Items: \_\_\_\_\_

(PLEASE CHECK ONE)

Prepared at event:  YES  NO | \*\*Prepared prior to event:  YES  NO \*\*Location: \_\_\_\_\_

**\*\*Per Hamilton County Ordinance 16-20-7, each location utilized for food handling and preparation is required to be separately permitted and inspected per each business utilizing the location in Hamilton County. If product is prepared in another county a copy of the permit for that facility and proof of inspection must be provided.**

Person in Charge: \_\_\_\_\_

Person in Charge Phone #: \_\_\_\_\_

Person in Charge Email: \_\_\_\_\_

Certified Food Manager (provide a copy of certification): \_\_\_\_\_

Name of Owner/ Co.: \_\_\_\_\_

Address of Owner/ Co.: \_\_\_\_\_

Owner's Phone #: \_\_\_\_\_ Owner's Email \_\_\_\_\_

Type of Facility:  Mobile Unit |  Stand/Tent |  Building      Number of days at event: \_\_\_\_\_

Permit Fee is \$20 (first day) + \$10 each additional day. **Total Fees = \_\_\_\_\_**

*Food Service Establishment without a permanent location; operating no more than 14 consecutive days in conjunction with an event or celebration where preparation occurs at event (ref. 410 IAC7-24-98)*

Please return this completed application along with a check or money order made payable to the Hamilton County Health Department.

Festival **name**, **location**, specific **date**, and **starting time** of event:

\_\_\_\_\_

The undersigned applies for a license to operate a temporary food service establishment pursuant to retail food establishment sanitation requirements in 410 IAC 7-24. The undersigned certifies receipt of the guidelines for operation, and that the establishment will be operated and maintained in accordance with these conditions.

Owner or Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_