

**HEALTH & HUMAN SERVICES AGENCY** 

## **PUBLIC HEALTH SERVICES**

Healthy People in Healthy Communities

## TEMPORARY FOOD PERMIT APPLICATION

- FEES ARE NON-REFUNDABLE
- APPLICATIONS MUST BE SUBMITTED (2) WEEKS PRIOR TO THE EVENT.
- APPLICATIONS NOT RECEIVED (2) WEEKS PRIOR TO THE EVENT WILL BE SUBJECT TO A \$54.00 LATE FEE
- APPLICATIONS RECEIVED WITHIN (3) DAYS OF THE EVENT **MAY NOT** BE ISSUED A PERMIT.
- APPLICATIONS SHALL BE ACCOMPANIED BY THE APPLICABLE FEE.
- FAXED APPLICATIONS WILL NOT BE ACCEPTED.
- HOME PREPARED OR STORED FOODS ARE NOT ALLOWED

LENGTH OF OPERATION (CONSECUTIVE DAYS) CHECK OF	NE BELOW:	
1-2 DAYS \$124.00 1-2 DAYS DEMO/FREE SAM	1PLE \$110.00	CFM 1-4 MO \$124.00
3-4 DAYS \$248.00 3-4 DAYS DEMO/FREE SAM	MPLE \$134.00	CFM 5-8 MO \$250.00
5-7 DAYS \$296.00 5-7 DAYS DEMO/FREE SAM	MPLE \$223.00	CFM 9-12 MO \$274.00
8-25 DAYS \$344.00 8-25 DAYS DEMO/FREE SA	AMPLE \$300.00	LATE FEE \$54.00
ANNUAL \$442.00 PRE PACKAGED/WATER \$6	52.00	
NAME OF COMMUNITY EVENT		
NAME OF COMMUNITY ORGANIZER		
LOCATION		
DATE OF EVENT SET UP		
NAME OF TEMP FOODFACILITY/BOOTH		
CONTACT PERSON	PHONE NUMBER	
ADDRESS CITY		
TYPE OF FOOD PREPARATION FACILITY (CHECK ONE)		
FULLY SCREENED IN BOOTH O	THER (ATTACH E	EXPLANATION)
FOOD/BEVERAGE ITEMSTO BE SOLD/GIVEN AWAY		
METHOD OF FOOD HANDLING AND STORAGE OF RAW F	FOODS	
METHOD OF HANDLING AND STORAGE OF COOKED/PRI	EPARED FOODS	
I HAVE READ, UNDERSTAND, AND AGREE TO COMPLY WIFACILITIES"- (CRFC 114335-114363)	TH THE "REQUIF	REMENTS FOR TEMPORARY FOOD
SIGNATURE	DATE	
NOTE: ALL ITEMS MUST BE COMPLETED. UNANSWERED	PORTIONS WILL	BE RETURNED FOR COMPLETION

PUBLIC HEALTH SERVICES

WHICH WILL DELAY YOUR HEALTH PERMIT.

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ENVIRONMENTAL HEALTH 351 Tres Pinos Road, Suite C-1 Hollister CA 95023 831-636-4035 MEDICAL THERAPY UNIT 761 South Street Hollister CA 95023 831-637-1989