Tarrant County Public Health Department
Environmental Health Promotion
1101 S. Main Street, Room 2300
Fort Worth, Texas 76104
Phone: (817) 321-4960 Fax: (817) 321-4961

Temporary Food Establishment Permit Application

PLEASE COMPLETE & RETURN THIS FORM WITH FEE AT LEAST 10 DAYS BEFORE THE START OF THE EVENT.

Fee Information: *(submit one of the following)*

1). $35.00 for each stand or unit.

2. IRS 501 (c) (3) official recognition documentation for tax exempt charitable organizations.

General Event Information:

3) Name of Event: _____

4) Date(s) of Event: _____

5) Hours of Operation: _____

6) Location of Event: _____

7) Event Coordinator:

Name: _____ Phone: _____

Address: _____

Applicant Information:

8) Your Organization/Business Name: _____

9) Applicant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Home Phone: _____

Mobile Phone: _____ Fax: _____

Email: _____

10) Does this business have a current mobile food unit or pushcart permit from the Tarrant County Health Department? [ ] Yes [ ] No
If yes, what is the permit type and site number? _____

Note: Vendors with these types of health permits are not required to pay the permit fee for a temporary food service establishment.

Menu Information:

11) List full menu to be served at the event: _____

_____

_____

_____

_____

_____

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12) Where will the food be purchased/obtained from: _____

_____

13) Will any foods be prepared prior to the start of the event? [ ] Yes [ ] No

If yes, where will the food be prepared? _____

_____

If answering yes to question 13, all foods prepared prior to the event are required to be made in an approved and permitted facility. A copy of the Food Establishment Permit and signed Commissary Agreement (attached) are required for approval of this application. Applications submitted without this information will be returned.

Has a copy of the Food Establishment Permit and signed Commissary Agreement been included with this application? [ ] Yes [ ] No [ ] N/A

14) Will frozen foods be thawed at the event? [ ] Yes [ ] No

If yes, describe process/method to be used: _____

15) How will any leftovers of cooked food be handled at the end of the day?

_____

Equipment Information:

16) How will food temperatures be checked during the event? _____

17) Describe equipment used at the event for:

a) Cold holding: _____

b) Hot holding: _____

c) Cooking/Reheating: _____

18) Describe hand washing facilities inside your temporary food establishment:

[ ]Plumbed Sink [ ]Gravity Flow Set-up [ ]Basin Set-up

19) Describe utensil washing facilities inside your temporary food establishment:

[ ]3 Compartment Sink [ ] 3 Basin Set-up

20) How will hot water be made available for the hand wash and utensil washing stations?

_____

21) What type of sanitizer will be used at the event? _____

22) How will potable water be obtained during the event? _____

23) How will waste water from hand & utensil washing be disposed? _____

_____

Form completed by: _____

Name/Title Date