WAYNE COUNTY HEALTH DEPARTMENT 100 South 5th STREET RICHMOND, INDIANA 47374 (765) 973-9245

APPLICATION FOR TEMPORARY FOOD SERVICE PERMIT

Complete the Temporary Food Service Permit application and return to the Wayne County Health Department <u>7 days prior to the event. Permit Fee</u> \$15.00 per day non-refundable.

NAME OF TEMPORARY FOOD SERVICE UNIT:				
NAME OF OWNER OR OPERATOR:				
ADDRESS:	_CITY:	STATE:	ZIP:	
TELEPHONE OPERATOR/OWNER:	OTHER N	JMBER		
NAME & LOCATION OF EVENT:				_
DATE(S) OF OPERATION: FROM:/	_/TO:			
**TIME OF SET UP –FOR INSPECTION_			**	
**EVENT COORDINATOR NAME & NUMBER (IF KNOWN)				
GARBAGE/REFUSE DISPOSAL: CITY LIQUID WASTE DISPOSAL: CITY FESTIVAL				
FOOD ITEMS SERVED:				
Are any food items prepared in part or in whole outside of the food unit: YES NO , If yes, where? Are any food items prepared at previous festivals prior to your arrival in Wayne County? Yes CERTIFIED FOOD HANDLER: NAME:				
EQUIPMENT CHECKLIST Below is a brief checklist of some of the equipment and requirements needed to operate a temporary food unit in Wayne County. 1. Three bay sink with hot and cold running water provided to each bay. 2. Hand washing sink with at least warm running water, soap and individual paper towels.				
 A wastewater tank to hold wastewater until properly disposed of (discharge of wastewater in or on the ground is prohibited) Any hose used to supply water to the unit must be of food grade quality. To check sanitizer concentration of wiping clothes and sanitizer at three bay sink, a chemical test kit shall be provided. A stem-type thermometer to check the internal temperature on hot/cold items. Ambient thermometers in each cold storage unit to check internal temperature of the unit. 				
Signature:		Date:	/ /	
			•••••	
For Office use only: Accept Date:	(Check Number		
Receipt Number		eceived by:		

NO REFUNDS