## Vigo County Health Department 147 Oak Street, Terre Haute, Indiana 47807 812-462-3281 Attn: Vicky

## 2016 Temporary Food Permit Application

We accept cash, cashier's check and money orders ONLY – No personal checks or credit cards.

- Applications must be received at least 15 days prior to the event
- Applications received 14 to 8 days prior to event will be charged a \$100.00 late fee
- Applications received 7 days or less prior to event will be denied a Food Permit

<b>Event Information:</b>					
Name of Your Establishment:					
			Name and Address of Your Establishment	's Owners:	
			Owner/Organization Name:		
			Home/Business Address:		
			City, State, Zip Code:		
			Home Phone: ( )	C	dell: ( )
YOU MUST SEND A COPY OF YOUR CE	ERTIFIED FOOD H	ANDLER WITH THIS APPLICATION and it			
must be available at the establishment during Please check which of the following test was		e requires that a Certified Food Handler must be on staff.			
☐ Certified Professional Food Manager ☐	Food Safety Mana	ger Certification Examination			
Name of person who took the test:		Date test was taken:			
Please choose one:					
Resident of Vigo County \$4	0.00 per day (\$80.0	0 maximum)			
☐ Non-Resident of Vigo County \$4	0.00 per day (\$100.	00 maximum)			
☐ Non-Profit Organization: No Fee					
I attest to the accuracy of the information provided in this appracess to this establishment and all records or information per		n this ordinance and allow the Vigo County Health Department specified in 410 IAC 7-15.5 and 410 IAC 7-24.			
		\$			
Signature of Owner or Manager	Date	Amount Enclosed			
For Health Dept Use Only:					
	unt Paid: \$				