

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

2009 TEMPORARY FOOD PERMIT APPLICATION

Please fill out form and sign in ink. All information must be included or the application will be returned.

Only cash, cashier's check, and/or money orders will be accepted.

- Application 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

A. Name of Establishment and Event:

Name of Establishment: _____

Name of Event: _____

Location of Event: _____

Date(s) of Event: _____

Type of Foods you will be serving: _____

B. Name & Address of Owners/Organization:

Owner(s) Name: _____

Home/Business Address, City, State & Zip Code: _____

Home Phone () _____ - _____

Cell Phone () _____ - _____

C. Please print Name, Address, City and Zip Code where you would like your application mailed to next year.

Name: _____

Address: _____

City, State & Zip Code _____

Please continue filling out application on back of this page.

For Health Department Use Only:

Date of Application: _____ Amount Paid: _____ Receipt# _____

Permit # T2009-# Clerk _____ Environmentalist _____ Receipt Rcvd. _____

D. Please check ONE type of establishment to determine fee:

Temporary Food Service/Market Booth:

Resident of Vigo County \$30.00 Per Day (up to \$60.00 Maximum)

Temporary Food Service/Market Booth:

Non-Resident of Vigo County. . . \$30.00 Per Day (up to \$90.00 Maximum)

Non-Profit Organization: No Fee

E. Please List your Certified Food Handler Below:

Name: _____ **Exp. Date:** _____

State where obtained: (i.e. Indiana, Illinois): _____

Company listed on Certification: _____

YOU MUST HAVE A CERTIFIED FOOD HANDLER ON STAFF. This information must also be available at the establishment. Original Certificate only, no photocopies.

Date of Application: _____ *Amount Enclosed:* _____

Signature of Owner/Manager: _____

Signature of Owner or Manager signifies that the above information is true and correct to the best of his/her knowledge.