

Application for a License to Conduct a Temporary: (check only one)

Instruction:

1. Complete the applicable section. (Make any corrections if necessary.)
2. Sign and date the application.
3. Make a check or money order payable to:
4. Return check and signed application to:

- Food Service Operation
 Retail Food Establishment

Fairfield Department of Health
 1550 Sheridan Drive, Suite 100
 Lancaster, Ohio 43130

Before the license application can be processed the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in not issuing a license. This action is governed by Chapter 3717 of the Ohio Revised Code.

Name of Temporary food facility:			
Location of event:			
Address of event			
City	State	Zip	Email
Start date: / /	End date: / /	Operation time(s):	
Name of license holder:			Phone number:
Address of License holder			
City	State	Zip	Email
List all foods being served/sold			

I hereby certify that I am the license holder, or the authorized representative, of the temporary food service operation or temporary retail food establishment indicated above:

Signature	Date
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Licensors to complete below

Valid date(s):	License fee:
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Application approved for license as required by Chapter 3717 of the Ohio Revised Code.

By	Date
Audit no.	License no.

**SURVEY & DRAWING FORM
Temporary Food Operation**

****Must Be Submitted with Application****

Fairfield Department of Health • 1550 Sheridan Drive, Lancaster, Ohio 43130 • Phone (740) 652-2800

Event _____ Dates _____

*Time *READY* for Inspection _____ Location of Event _____

Licensee Name _____ Phone# _____

Licensee Address _____

Will all potentially hazardous foods be prepared at event? YES NO

If prepared elsewhere give name and address. Attach a copy of the facility license. _____

MENU _____

List Sources of Foods. _____

Describe how hot foods will be maintained at 135 Degrees F or above. _____

Describe how cold foods will be maintained at 41 Degrees F or below. _____

Describe how proper food temperatures will be maintained during transportation. _____

List all equipment and utensils to be used at event. _____

How will displayed and stored food be protected from contamination (dust, rain)? _____

How will food contact surfaces be protected to prevent contamination of food? _____

Describe equipment and utensil washing set up. _____

Continued on back!

← OVER

Describe hand washing set up. _____

How will garbage be disposed of? _____

How will wash water be disposed of? _____

SKETCH OF BOOTH & EQUIPMENT LOCATIONS!
****Required****

