

Application:

FOOD SERVICE EVENT REGISTRATION

DATE OF APPLICATION: _____ (Must be 30 days prior to the event).

PLACE OF EVENT OR FESTIVAL: _____

First day of the Event: _____ End of Event: _____

Group or Sponsor's Name: _____

Mailing Address, _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax #: _____

Owner/Manager/Person in charge: _____
(CIRCLE ONE)

**All vendors must pre-register and pre-pay all applicable fees prior to the event.
All late registration of Vendors must be approved prior to the event.**

A list of all vendors must be supplied 72 hours prior to the event with the following required information.

Name of Establishment or Temporary Unit name:
Address of the Establishment or Temporary Unit: (Address, City, State, Zip)
Telephone or Contact Number:
E-mail:
Name of Owner:
Owners Address, City, State, Zip:
Certified Food Handler and Company Name of Certification: (Example) National Registry, Prometric, ServSafe
Listing of Menu and type of food produced:
For Profit or Non-Profit?

Will the following utilities be supplied?

Water: _____ **Public:** _____ **Private:** _____

Vendor supplied water: Yes: _____ No: _____

If vendor supplied, the source must be identified.

If private, a water test report must be submitted 72 hours prior to the event.

Map layout of water outlets must be supplied with the application.

Electricity: _____ **Public:** _____ **Private:** _____

Vendor supplied generators: Yes: _____ No: _____

Map layout of Electrical outlets must be supplied with the application.

Sewage Disposal: _____ Public: _____ Private: _____

Sewage or waste water shall not be disposed in a storm drain.

An approval must be supplied from the Sanitary District prior to the event.

Map layout of disposal sites must be identified and supplied with the application.

Trash Removal: _____ Public: _____ Private: _____

If private, what will be the frequency of disposal: _____

A map layout of the event and placement of the vendors must be supplied with the application.

Does the event have all the required permits from the city, county, board of works, parks department, fire departments, property owners, and any other agency that would have jurisdiction over your event, festival, or celebration?

Please submit all approvals and documents with the application.

Notes: _____

Enclosed fee: \$ _____
(\$ 35.00per event)

Temporary Food Vendor fee per event \$ 70.00
Seasonal Temporary Food Vendor fee (6 Month) \$ 215.00

ALL PERMIT FEES ARE PAYABLE TO: Delaware County Health Department

I understand that it is the responsibility of the event sponsor to ensure that all of the vendors must comply with the Indiana State Retail Food Establishment Sanitation Requirement 410 IAC 7-24 and the Delaware County Ordinance 2004-013.

I also understand that if the Delaware County Health Department determines that a food vendor is not in compliance with the above mentioned code and ordinance that it will be the responsibility of the event sponsor to ensure that the vendor complies with the requirements of the Health Department or is removed from the registered event.

I hereby apply for a registration of an event, festival, or celebration in Delaware County and agree to comply with all provisions of Delaware County Ordinance 2004 - 013.

Applicant's Signature: _____

Print Your Name: _____

Name of Establishment or Temporary Unit name:

Address of the Establishment or Temporary Unit: (Address, City, State, Zip)

Telephone or Contact Number: _____

E-mail: _____

Name of Owner: _____

Owners Address, City, State, Zip:

Name of Certified Food Handler and Company Name of Certification: (Example) National Registry, Prometric, ServSafe

Listing of Menu and type of food produced: _____

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