



**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
TEMPORARY FOOD SERVICE APPLICATION**

Application is hereby made to operate a temporary food establishment in accordance with Howard County Code, Section 12.107. Please type or print clearly.

No storage or food preparation is permitted from a home or an unlicensed facility.

SUBMIT COMPLETED FORM 2 WEEKS PRIOR TO EVENT.	
Name of Event:	Date of Event:
Location of Event:	
Event Coordinator or Contact Person:	Phone #:
Owner's Name:	Business Name:
Mailing Address:	
City, State:	Zip Code:

How many of each of the following types of food service will you be operating at this event?
Booth: _____ Trailer: _____ Other [describe] _____

Water Supply: [] Public [] Private **Sewage Disposal:** [] Public [] Septic System

Do you have an Out of State/County License? [] Yes [] No

If you selected "Yes", please complete the following:

Name of Agency that issued the license:
Agency Address:
Agency Phone Number:

I have read and understand the "Standards for the Dispensing of Food from Temporary Facilities" packet, and I agree to comply with all of the requirements.

(Authorized signature)

(Title)

Make Check / Money Order payable to: DIRECTOR OF FINANCE Send completed application and fee (no cash) to: HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH – FOOD PROGRAM 7178 Columbia Gateway Drive Columbia, MD 21046 (410) 313-1772	FOR OFFICE USE ONLY
	FEE DUE: \$72.00 DATE DUE: RECEIPT NO:

TEMPORARY FOOD FACILITY INFORMATION SHEET

(Return with the Temporary Food Service Application)

Name of Event:	Date of Event:
Name of Food Booth:	
Name & Phone Number of Food Booth Operator:	

You may use the back of this paper if you require more space for the questions below.

1. WHERE WILL FOOD BE STORED AND/OR PREPARED PRIOR TO THE EVENT?

No storage or food preparation is permitted from a home or an unlicensed facility. Include proof of storage and/or preparation facility licensure and ID number, and a copy of the most recent inspection report by licensing agency.

Address of Facility: _____

2. WHERE WILL FOOD SERVED AT THE EVENT BE PURCHASED?

Name and Location of Supplier: _____

3. HOW WILL YOU KEEP COLD FOOD COLD (41°F or below)? Include list of *cold hold* equipment. (Examples of cold food are: raw meat, poultry, seafood and dairy products)

4. HOW WILL YOU KEEP HOT FOOD HOT (135°F or above)? Include list of *hot hold* equipment. (Examples of hot food are: cooked, ready-to-serve meat, poultry, and seafood)

5. DESCRIBE THE HAND WASHING FACILITIES IN YOUR BOOTH: (Soap, paper towels and warm water must be supplied.)

6. IF ONE OF YOUR COOKING UTENSILS FALLS ON THE GROUND, HOW WILL YOU WASH, RINSE, AND SANITIZE IT? DESCRIBE WASH-RINSE-SANITIZE SET UP.

7. LIST OR PROVIDE A MENU OF ALL FOOD AND BEVERAGE ITEMS THAT WILL BE SERVED:

8. ATTACH A SKETCH OF YOUR FOOD BOOTH. (Show equipment, hand-washing, utensil washing area. Include method of compliance with enclosed screening requirements.)