

Vigo County Health Department
147 Oak Street, Terre Haute, Indiana 47807
812-462-3281 Attn: Brooke
2017 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

Event Information:

Name of Your Establishment: _____

Name of the Event: _____

Location of Event: _____

Date(s) of the Event: _____

Event Coordinator/Main contact person for this event: _____

Types of food you will be serving: _____

Name and Address of Your Establishment's Owners:

Owner/Organization Name: _____

Home/Business Address: _____

City, State, Zip Code: _____

Home Phone: () _____ Cell: () _____

YOU MUST SEND A COPY OF YOUR CERTIFIED FOOD HANDLER WITH THIS APPLICATION and it must be available at the establishment during the event. State code requires that a Certified Food Handler must be on staff.

Please check which of the following test was taken:

☐ Certified Professional Food Manager ☐ Food Safety Manager Certification Examination ☐ ServSafe

Name of person who took the test: _____ Date test was taken: _____

Please choose one:

☐ Resident of Vigo County \$40.00 per day (\$80.00 maximum)

☐ Non-Resident of Vigo County \$40.00 per day (\$100.00 maximum)

☐ Non-Profit Organization: No Fee

I attest to the accuracy of the information provided in this application. I will comply with this ordinance and allow the Vigo County Health Department access to this establishment and all records or information pertinent to the inspection as 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:

Permit #: 2017- _____ Amount Paid: \$ _____