

The Milford Health Department

82 New Haven Avenue ♦ Milford, CT 06460 Tel 203.783.3285 ♦ Fax 203.783.3286

APPLICATION FOR TEMPORARY FOOD SERVICE PERMIT

All vendors serving food and beverages to the public on a temporary basis are required to have a food service permit. Temporary permits are valid for a maximum of two (2) consecutive weeks. Please complete the permit application and return it to this office no later than 10 <u>business</u> days before the event. If you are a licensed non-Milford food establishment, please also provide a copy of your food license.

Fee: \$75.00, Non-profit: \$1.00 (Fees are Non-Refundable) \$75.00 Late fee for applications received 5-9 business days before the event \$150.00 Late fee for applications received 2-4 business days before the event

	Fee Paid:
Name of event:	
Event Location:	·
	Hours of Event:
Date/Time of Set-Up:	Anticipated Peak Attendance:
Name of Operator/Orga	nization:
	(C):
	Charge of Booth: Name:
Phone: (C)	Email:
	NDLERS AT THE EVENT: (You must keep on file a list of all employees who work in the food booth)
Name:	Phone:
	Phone:
	Fered including condiments etc: (Use back of this sheet if necessary) shome is allowed at the event
	prior to and during transportation to the event? (Example, coolers with ice, hot food

What equipment will be used to heat/cook hot food on site?
How will each food item be held hot &/or cold at the event to maintain required temperatures?
Describe means for hand washing in the food booth: (see attached sketch)
Describe how utensils, equipment, cutting boards, etc. will be washed, rinsed, sanitized: (see attached sketch)
What restroom facilities are available?
Describe how garbage, trash and unused food will be discarded:
 ★ ATTACH A SKETCH OF THE FOOD BOOTH SET-UP The following tools are required in your food booth: ✓ A thin probe thermometer or thermocouple with a thin probe attachment ✓ Thermometers in all coolers/refrigerators ✓ Sanitizing solution testing kit (Chlorine or Quaternary ammonia) NOTE: IF YOU ARE PERFORMING ANY COOKING THAT PRODUCES GREASE VAPORS, YOU WILL BE REQUIRED BY THE MILFORD FIRE MARSHAL TO HAVE A CLASS K PORTABLE FIRE EXTINGUISHER ON-SITE DURING THE EVENT The undersigned agrees to abide by all State and Local Ordinances regarding the dispensing of food and beverages with the understanding that failure to comply with the before mentioned may result in the revocation or the suspension of your food license.
Signature: Date:
For office use only
Application reviewed by: Date:
Comments:
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4/2023

Please complete the table below
List all food/beverages to be prepared/served - Use the back of this sheet if necessary

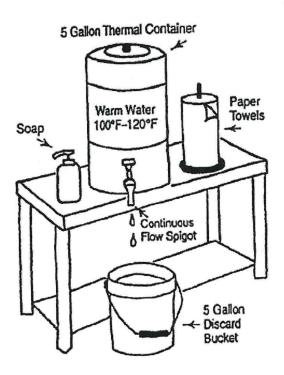
		·		*					entral and the second s	EXAMPLE: Grilled Chicken	ALL FOOD ITEMS
										ABC Supermarket 250 Main St. Milford	FOOD SOURCE
										X	HOW SERVED
4.										Marina each si	
4/2023										5/2/04, 11:00am	DATE AND TIME OF FOOD PREP

Attachment A

Drawing of Temporary Food Booth Set-Up

holding equipment, hand washing facilities, worktables, dishwashing facilities, food and single service storage, garbage containers, and customer In the following space, provide a drawing of the Temporary Food Booth set-up. Identify and describe all equipment, including cooking and cold service areas. Refer to the Temporary Event & Temporary Food Service guidelines for information.

TEMPORARY HANDWASHING STATION



TEMPORARY EVENT Volunteer Sign-In Name Phone # Time-Out Time-In

Date Time Food Item Action Action	Log	Action Signature														
	Food Product Lo	Food Item										×				

(Use when foods are being transported from a Food Service Establishment to an event) **FOOD TEMPERATURE LOG**

FOOD ITEM	FINAL COOKING TEMP	ARRIVAL	ARRIVAL	FOOD ESTABLISHMENT QFO REP
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