



# The Milford Health Department

82 New Haven Avenue ♦ Milford, CT 06460

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## 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 business 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: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Hours of Event: \_\_\_\_\_

Date/Time of Set-Up: \_\_\_\_\_ Anticipated Peak Attendance: \_\_\_\_\_

Name of Operator/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone: (W): \_\_\_\_\_ (C): \_\_\_\_\_

Email: \_\_\_\_\_

Permit Holder/Person in Charge of Booth: Name: \_\_\_\_\_

Certified Food Protection Manager: Name: \_\_\_\_\_

**\*\* PROVIDE CURRENT CERTIFICATE IF MENU INCLUDES TCS FOOD ITEMS\*\***

Phone: (C) \_\_\_\_\_ Email: \_\_\_\_\_

**PRIMARY FOOD HANDLERS AT THE EVENT:** (You must keep on file a list of all employees who work in the food booth)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

List **ALL** foods sold/offered including condiments etc: **(Use back of this sheet if necessary)**

*No food prepared at home is allowed at the event*

\_\_\_\_\_  
\_\_\_\_\_

How will food be stored prior to and during transportation to the event? (Example, coolers with ice, hot food carriers, refrigerated truck, etc): \_\_\_\_\_

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**

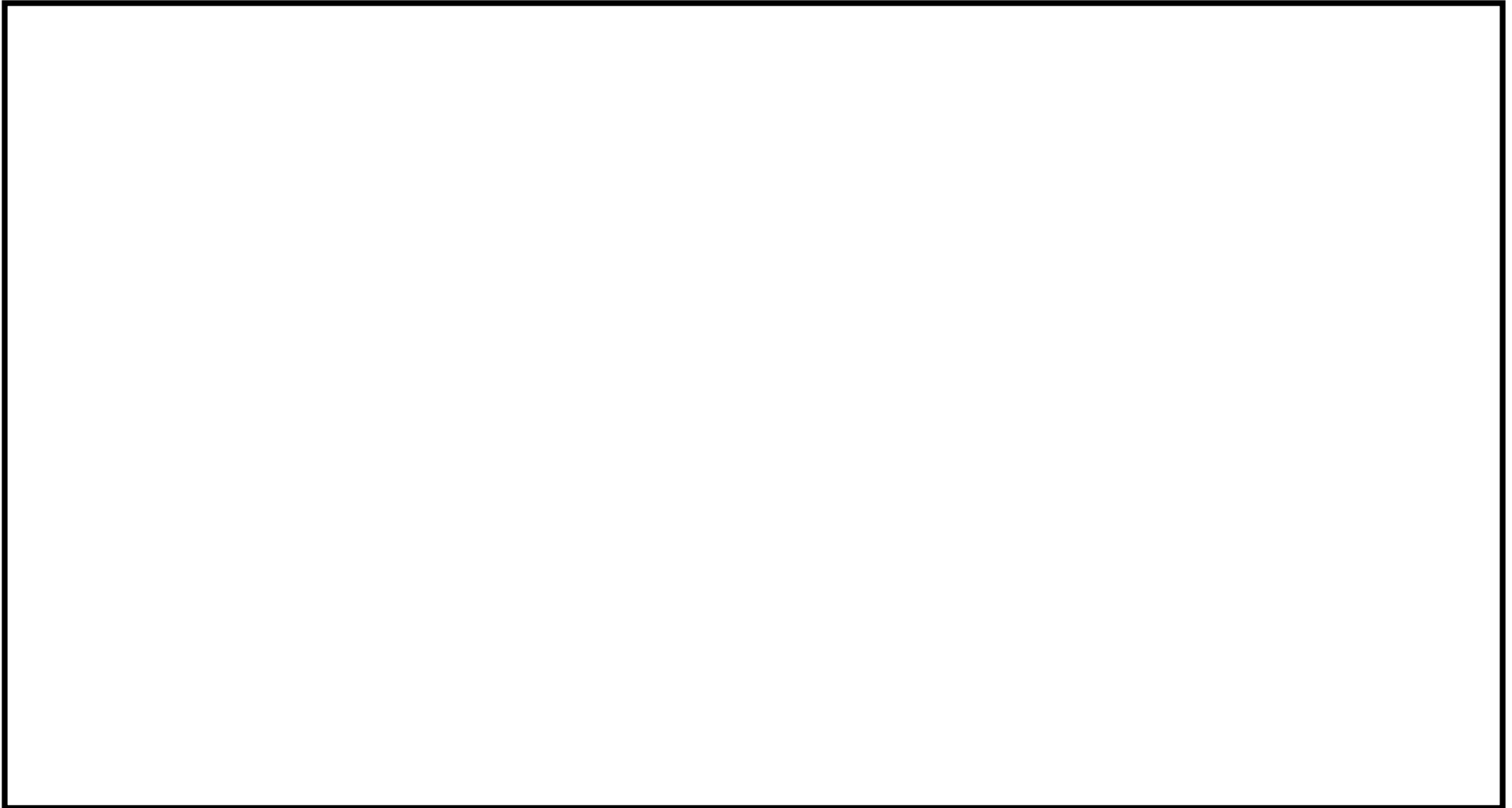
Application reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

## Attachment A

# Drawing of Temporary Food Booth Set-Up

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

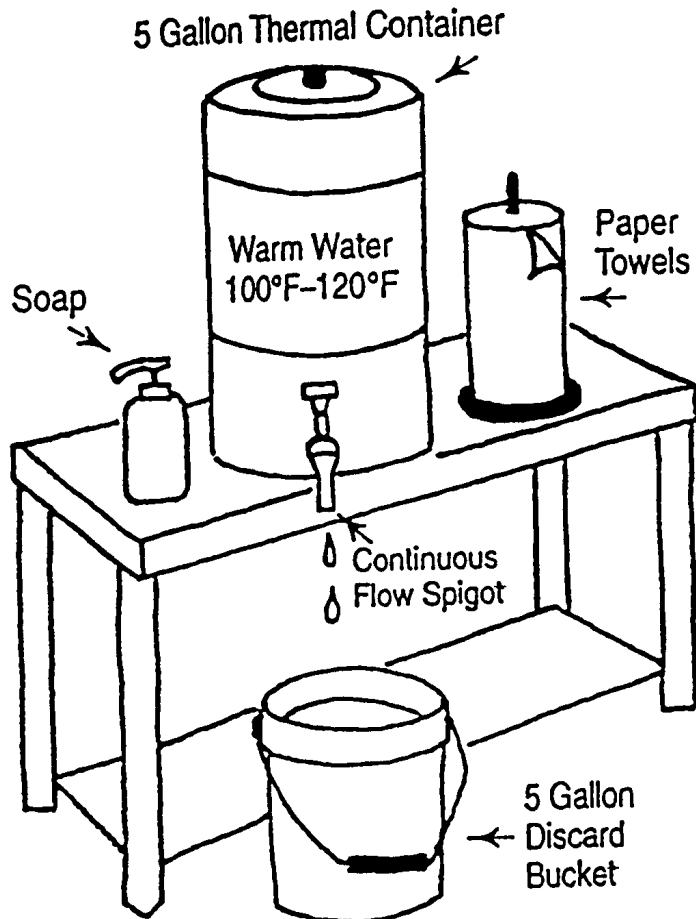


**Please complete the table below**

List all food/beverages to be prepared/served – *Use the back of this sheet if necessary*

ALL FOOD ITEMS	FOOD SOURCE	HOW SERVED		PREPARATION LIST ALL STEPS WHERE APPLICABLE	DATE AND TIME OF FOOD PREP
		HOT	COLD		
<b>EXAMPLE:</b> Grilled Chicken	ABC Supermarket 250 Main St. Milford	X		Marinate chicken in refrigerator, cook to order 7 min each side	5/2/04, 11:00am

## TEMPORARY HANDWASHING STATION



The handwash facility shall consist of, at least, a 5 gallon insulated container with spigot that provides a continuous flow of warm running water (100-120°F), soap, individual paper towels, and a 5 gallon bucket to collect the dirty water.

ANY BOOTH FOUND WITHOUT ADEQUATE HANDWASHING FACILITIES AS DESCRIBED ABOVE WILL BE CLOSED UNTIL ADEQUATE FACILITIES CAN BE PROVIDED.