



The Milford Health Department

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

Receipt # _____
 Cash Check
 Check # _____

APPLICATION FOR TEMPORARY FOOD SERVICE LICENSE

ALL VENDORS SERVING FOOD AND BEVERAGES TO THE PUBLIC ON A TEMPORARY BASIS ARE REQUIRED TO HAVE A MILFORD TEMPORARY FOOD SERVICE LICENSE

THIS APPLICATION MUST BE RECEIVED AT LEAST 10 BUSINESS DAYS BEFORE THE EVENT

- A \$75.00 license fee must accompany this application, Non-profit: \$1.00 - Payable by cash or check only. (Fees are Non-Refundable)
- \$75.00 Late fee for applications received 4-9 business days before the event.
- **Temporary Food Service License Applications will not be accepted if submitted less than four (4) business days before the event.**
- Application submission does not guarantee approval. Final approval will be determined by the inspector at the time of the inspection.

Food Service Vendor Information

| | | |
|--|--|---|
| Business Name/Organization: | | Business Phone: |
| Mailing Address: | | |
| Name of Operator / License Holder: | | Operator/License Holder Cell Phone #: |
| Operator/License Holder Email: | | |
| Name of Person in Charge (PIC) at Event: | Serving TCS* Foods? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, attach a copy of the Certified Food Protection Manager (CFPM) certificate for the PIC.</i> | |
| Person in Charge Email: | | Person in Charge Cell Phone #: |
| Name of Alternate Person in Charge at Event: | Serving TCS* Foods? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, attach a copy of the CFPM certificate. for the Alternate PIC.</i> | |
| Alternate Person in Charge Email: | | Alternate Person in Charge Cell Phone #: |
| Type of Operation: <input type="checkbox"/> Truck <input type="checkbox"/> Trailer <input type="checkbox"/> Tent <input type="checkbox"/> Pushcart <input type="checkbox"/> Combo Truck/Trailer & Tent <input type="checkbox"/> Other: | | |
| Set up Date: | Set up Time: | Ready for Inspection at: |
| <i>Please note that you shall <u>not</u> prepare/serve/sell food until a temporary food service license has been issued by the inspector.</i> | | |

Event Information:

| | |
|-----------------------------------|-----------------------------------|
| Name of Event: | Date of Event: |
| Event location: | |
| Name of Event Coordinator: | Event Coordinator Phone #: |

*Time/temperature control for safety (TCS) food - food that must be kept under time and temperature control to prevent the growth of harmful microorganisms or toxin formation. Examples include meats, poultry, fish, eggs, dairy, cooked grains, cut leafy greens and melons, sprouts and cooked vegetables.

Food Service Operation – check all that apply

Base of Operations/ Commissary Kitchen Used : Yes - *Attach copy of food service license* No

Hot Holding Equipment On Site: Steam table Stove Chafing dish Oven Grill Hot holding cabinet/case Other:

Cooking equipment On Site: Stove Oven Fryer Grill Smoker Other:

Cold Holding Equipment On Site: Refrigerator - #: Freezer Cooler with ice Other:

Transport Equipment: Working refrigerators (generator must provide power while in transit) Coolers layered with ice Cambro box – cold food Cambro box – hot food Other:

Food Storage Method: Licensed facility On Truck/Trailer Purchased day of event Other:

How will you avoid bare hand contact with food? Non-latex gloves Tongs Utensils Deli tissue Other:

Handwashing Sink: Handwashing sink on vehicle Portable Handwashing Sink Temporary Handwashing Station

Dishwashing: Dishwashing machine Three compartment sink Portable three basins to wash, rinse, & sanitize

Where: On site On truck At licensed base of operation

Sanitizer: EPA registered (food service) chlorine bleach & chlorine test strips Quaternary ammonia liquid or tablets & Quat test strips Other:

Restroom Facilities: Within 200 feet Same building as event Portable toilets On truck/trailer – self contained

Garbage Disposal: Provided by event coordinator On-site dumpster Will collect and properly dispose

Water Supply: Hook up provided by event coordinator - Location: _____ Bottled water

Water tank on vehicle: Private Well - Location: _____ Public Water – Name: _____

Hot water available

Wastewater disposal: Sewer – City of: _____ Base of operations Service Area

Provided on-site by event coordinator

Sampling: Yes No If YES, describe method:

Application MUST include all required attachments:

- List of food and beverages served/sold (use attached sheet – make additional copies as needed)
- Diagram of the food booth or food truck/trailer (use attached sheet)
- Certified Food Protection Manager Certificate(s) if Class 2,3, or 4 establishment and/or serving TCS foods
- Copy of food service license for non-Milford establishment
- Copy of CT Department of Consumer Protection license for CT-based Cottage Food or Food Manufacturing businesses.

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: _____

List all food & beverage items below:

Make extra copies of this sheet as needed to list full menu

| Food/Beverage | Food Source | How Served | Where & When Prepared | Preparation Method | Equipment used |
|-----------------------------------|--------------------|---|---|---|---|
| <i>Example: chicken wings</i> | <i>Sysco</i> | How served? <input checked="" type="checkbox"/> Hot <input type="checkbox"/> Cold Cooled & reheated? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <i>At base kitchen day before event; reheated on the truck per customer order</i> | <i>Fry chicken wings in fryer at base kitchen & cool on sheet pans in walk-in; reheat in the fryer on the truck per order</i> | <i>Fryer at base kitchen & on truck; refrigeration at base kitchen and on truck</i> |
| | | How served? <input type="checkbox"/> Hot <input type="checkbox"/> Cold Cooled & reheated? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| | | How served? <input type="checkbox"/> Hot <input type="checkbox"/> Cold Cooled & reheated? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
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Layout Diagram of Food Booth /Food Truck - Draw diagram to scale (1/4" = 1 ft)

