

Application for Temporary Food Service Permit

Alaska Department of Environmental Conservation Division of Environmental Health Food Safety & Sanitation Program



PURPOSE (check one)				☐ 2-3 Day	y Event	☐ 4-7 Day E	vent	□ 8-28 Day Event						
	Check if this event occurs	multiple time	s in a year. If so	, please list d	ates:									
1- _J is	FEE (check one) \$35.00 for 1 Day Event¹ \$65.00 for 2-3 Day Event¹ \$90.00 for 4-7 Day Event¹ \$120.00 for 8-28 Day Event² Non-Profit/Fee Exempt Attach a copy of the letter from the IRS stating your status as 501(c) (3).3 \$\$ School Fundraiser/Fee Exempt 1-If the application is submitted fewer than 7 days before the event the fee is doubled. 2-If the application is submitted fewer than 15 days before the event the fee is doubled. 3- Fee Exempt Organizations late fees equivalent to the original fee will be applied to applications that are not received in time periods noted in 1 and 2.													
Вс	ooth or Organization Name			Responsible P	erson		Telephon	Telephone						
Ma	ailing Address				City		State	Zip	Zip					
En	nail Address				Fax									
Na	ame of Event and Location						Dates of I	Dates of Event						
1. 2. 3.	 Will all foods be prepared at the temporary food service booth? Yes: Fill out Section A No: <u>Attach a copy</u> of the signed agreement for use of an approved kitchen, listing dates, times, preparation and the storage of food items and fill out Sections A & B. 													
SE	CTION A - At the booth													
	FOOD	THAW	CUT/ASSEMBL	E COOK	COOL	COLD HOLDING	REHEAT	HOT HOLDING	PORTION/PKG					
1.														
2.														
3.														
4.														
5.														
SE	CTION B - At the approv	ved kitche	n											
	FOOD	THAW	CUT/ASSEMBL	E COOK	COOL	COLD HOLDING	REHEAT	HOT HOLDING	PORTION/PKG					
1.														
2.														
3. 4.														
5.														
 6. 	On the back of this page, <u>dra</u> Source(s) for meat, poultry & Source of and storage of wate Storage and disposal of waste Storage and disposal of garba An event that lasts 4 days or the operator meet this requ certify that I am familiar with coordance with the regulation	seafood:cer:ci ewater:ci age:di longer the op- uirement?	ity □ othe ity sewer □ othe umpster □ othe erator is required Yes □ No □	r er to either have] N/A <i>If yes</i>	an <u>Alaska Foo</u> , pl ease attac	od Worker Card or be h a copy of the Food	a <u>Certified Foo</u>	od Protection Mana	ate					
Α	pplicant's Signature						Date:							
Pa	ayment Method: □Check # _ itials: Permit #:_		Credit Ca	ard □Cash I	FICE USE ONLY Payment Amo	ount:	Date Ro	ec'd:						

n/Organ th Sketc		on N	Nam	e: _																		 	 	_	
the dra □ handv □ dishwater □ cookir □ refriget □ worktater □ food/s escribe f	vash ash f ng ed erator ables ingle	facili acilit luipn s ser	ities ties nent vice	uter	nsil s	stora	ge										nt in	clud	ing:						
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Permi						App															Dat				

☐ Hand delivered ☐ Date mailed: ☐ Emailed

Copy to Applicant: