

TEMPORARY FOOD ESTABLISHMENT PERMIT APPLICATION

Food/Beverage Vendors, please read the following:

- *Original application will only be accepted if complete & accompanied by the correct fee, photo ID, & sales tax ID*
- *Separate form and permit required for **each** temporary food establishment.*
- *All applications and fees must be received **seven (7) days before** the temporary event to **avoid late fee (\$100.00)**.*
- ***Permit fees are non-refundable.***
- *A separate Coordinator application form must be submitted by the coordinator of the single event or celebration. Otherwise, your application may be null and void.*

Fee Schedule: Please check one.

Non-profit Fee Exempt Vendor

<input type="checkbox"/> 1-3 days = \$50	<input type="checkbox"/> 4 days = \$65	<input type="checkbox"/> 5 days = \$80
<input type="checkbox"/> 6 days = \$95	<input type="checkbox"/> 7 days = \$110	<input type="checkbox"/> 8 days = \$125
<input type="checkbox"/> 9 days = \$140	<input type="checkbox"/> 10 days = \$155	<input type="checkbox"/> 11 days = \$170
<input type="checkbox"/> 12 days = \$185	<input type="checkbox"/> 13 days = \$200	<input type="checkbox"/> 14 days = \$215

Applicant/Owner Information:

Name of Temporary Food Establishment: _____

Name of Owner: _____

Address of Responsible Owner: _____

Email Address (Required): _____ **Contact Phone #: ()** _____

Texas Tax Permit Number or Non Profit Tax Number (Copy must be attached): _____

Event Information:

Name of Single Event or Celebration: _____

Date and Time of Single Event or Celebration:

Start Date (MM/DD): _____ **End Date (MM/DD):** _____
Start Time: _____ **End Time:** _____

Location of Single Event Celebration:

 (Street) (City) (State) (Zip) (Lot/Space #)

Coordinator responsible for the Single Event or Celebration:

Name: _____ **Contact Phone #: ()** _____

Email Address (Required): _____ **Address:** _____

(Please fill out back page.)

