



DEVELOPMENT SERVICES

HEALTH & FOOD SAFETY
George A. Purefoy Municipal Center
6101 Frisco Square Blvd. 3rd Floor
Frisco, TX 75034
T: 972-292-5304 F: 972-292-5313
Email health@friscotexas.gov

Office Use Only:
Permit Number:
Application Date:
Event Start Date:
Event End Date:

TEMPORARY FOOD ESTABLISHMENT PERMIT APPLICATION

Complete this form to operate for a period not to exceed 14 days in conjunction with a single event

- TEMPORARY FOOD ESTABLISHMENT (\$50.00) - Fee must be paid at time of issuance of permit.
POSTAGE & HANDLING FEE (\$5.00) - (Permit placard must be picked up at the Development Services lobby located at 6101 Frisco Square Blvd. 3rd Floor, if P&H fee not paid.)
LATE FEE (\$50.00) - Applies if received within ten (10) days of event.

BUSINESS/ORGANIZATION/OWNER NAME:
BOOTH NAME (IF APPLICABLE):
CONTACT PERSON:
STREET ADDRESS: CITY: STATE: ZIP:
TELEPHONE: () - EMAIL:

EVENT NAME / TYPE:
EVENT LOCATION (ADDRESS):
EVENT DURATION (DAYS/TIMES):

- PLEASE ATTACH DETAILS ON THE FOLLOWING:
DRAWING SHOWING LAYOUT OF BOOTH, ALL EQUIPMENT, FOOD PREP AREAS AND PORTABLE HAND WASH SINK (WHERE APPLICABLE).
LIST ALL FOOD ITEMS THAT WILL BE SAMPLED OR SERVED, INCLUDING DRINKS AND CONDIMENTS
(CHECK ONLY) IF ONSITE COOKING IS REQUESTED
WRITTEN APPROVAL FROM EVENT HOST
FOOD MANAGER CERTIFICATION (IF TIME/TEMPERATURE CONTROL REQUIRED FOR FOOD SAFETY)
FOOD HANDLER CERTIFICATION (IF NO TEMPERATURE CONTROL REQUIRED)
PROOF OF FOOD ORIGIN OR WHERE FOOD IS OBTAINED / PURCHASED FROM
MANUFACTURER / STORAGE LICENSE
FOOD LABEL
MANUFACTURER SPECIFICATION SHEETS OR PICTURES OF EQUIPMENT TO BE USED TO MAINTAIN PRODUCT TEMPERATURE.

All information in this application (and attachments) is true to the best of the applicant's knowledge and belief. Applicant acknowledges the permit applied for is subject to revocation if the establishment fails to comply with applicable City ordinances and/or State laws.

Applicant Name (printed) Signature Date



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SHORT-TERM MERCHANT PERMIT APPLICATION

This form **MUST** be completed in full before Health Permit(s) are issued.
Applications must be submitted ten (10) days prior to operation or a late fee will be charged.

<input type="checkbox"/> 0 - 6 MONTH \$ 50.00	<input type="checkbox"/> 6 - 12 MONTH \$ 100.00
<input type="checkbox"/> POSTAGE & HANDLING FEE (\$5.00) - (Permit placard must be picked up at the Development Services lobby located at 6101 Frisco Square Blvd. 3 rd Floor, if P&H fee not paid.)	
<input type="checkbox"/> LATE FEE (\$50.00) – Applies if received within ten (10) days of operation.	

BUSINESS NAME: _____
OWNER NAME: _____
CONTACT PERSON: _____
MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
TELEPHONE: (____) _____ - _____ EMAIL: _____

LOCATION ADDRESS: _____	BOOTH #: _____
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PLEASE ATTACH DETAILS ON THE FOLLOWING:
<input type="checkbox"/> DRAWING SHOWING LAYOUT OF BOOTH, ALL EQUIPMENT, FOOD PREP AREAS AND PORTABLE HAND WASH SINK (WHERE APPLICABLE).
<input type="checkbox"/> LIST ALL FOOD ITEMS THAT WILL BE SAMPLED OR SERVED, INCLUDING DRINKS AND CONDIMENTS
<input type="checkbox"/> (CHECK ONLY) IF ONSITE COOKING IS REQUESTED
<input type="checkbox"/> WRITTEN APPROVAL FROM PROPERTY OWNER OR DESIGNEE
<input type="checkbox"/> FOOD MANAGER CERTIFICATION (IF TIME/TEMPERATURE CONTROL REQUIRED FOR FOOD SAFETY)
<input type="checkbox"/> FOOD HANDLER CERTIFICATION (IF NO TEMPERATURE CONTROL REQUIRED)
<input type="checkbox"/> PROOF OF FOOD ORIGIN OR WHERE FOOD IS OBTAINED / PURCHASED FROM
<input type="checkbox"/> MANUFACTURER / STORAGE LICENSE
<input type="checkbox"/> FOOD LABEL
<input type="checkbox"/> MANUFACTURER SPECIFICATION SHEETS OR PICTURES OF EQUIPMENT TO BE USED TO MAINTAIN PRODUCT TEMPERATURE.

All information in this application (and attachments) is true to the best of the applicant's knowledge and belief. Applicant acknowledges the permit applied for is subject to revocation if the establishment fails to comply with applicable City ordinances and/or State laws.

Applicant Name (printed) _____	Signature _____	Date _____
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