



TORRINGTON AREA HEALTH DISTRICT

350 Main Street ♦ Suite A ♦ Torrington, Connecticut 06790

Phone (860) 489-0436 ♦ Fax (860) 496-8243 ♦ E-mail info@tahd.org ♦ Web Address www.tahd.org

LICENSE FEE _____

PAID YES NO
LATE FEE YES NO

"Promoting Health & Preventing Disease Since 1967"

Courtesy of: Arthur H. Howland & Associates, P.C., Civil Engineers, Land Surveyors, Soil Scientists & Land Use Permitting!
Call Us! (860) 354-9346 or visit <http://ahhowland.com> For More Info! (This Text Will Not Print When You Print Document)

TEMPORARY FOOD SERVICE APPLICATION

Name of **Person** completing application _____ Phone _____
Street Address _____ Town _____ State _____

TEMPORARY FOOD SERVICE EVENT INFORMATION

Event _____ Date _____ Time _____

Location _____ Town _____

Sponsor/Charity (if applicable) _____ Phone _____

Name of **Food Service Booth** _____

If the application provided pertains to additional events, **complete the backside** and indicate the **event names, locations, dates, and times**.

Please complete the following information:

1. Provide a list of foods, beverages & condiments which will be served at the event noted above on the backside of this application or submit an additional document/menu.

2. Prior to the event the above listed items will be prepared at the following location:

Name _____ Street Address _____

Town _____ State _____ Zip Code _____ Phone _____

3. Food items will be properly stored prior to the event at _____

Please provide the food safety procedures for the above event:

1. Temperature requirements for cold and hot food items will be maintained at site and during transportation in the following manner:

Cold food items @ 45 degrees F or below

Transporting: _____

At site: _____

Hot food items @ 140 degrees F or above

Transporting: _____

At site: _____

2. Hand washing for the above event will be provided in the following manner:

3. Equipment, utensils, cutting boards etc. will be sanitized in the following manner:

\$40 Per Unit / Per Event – for one day event.

\$60 Per Unit / Per Event – license for a single event that operates at a fixed location for a temporary period of time (2 or more consecutive days not to exceed 14 days).

A discount of 10% will be given if the application and fees for ALL scheduled events the vendor is planning to attend within the respected calendar year are received in the TAHD office prior to April 1st. Applications received after April 1st WILL NOT be granted any discount.

Religious groups, youth organizations and agencies funded in whole or in part by tax dollars from towns which are members of the Torrington Area Health District will be exempt from the registration fee. **Fee exempt operations are obligated to submit the application 10 workings days prior to the event. Failure to apply will result charging the above fee structure as a late fee.**

I have thoroughly reviewed the attached material. I understand that I am liable for the quality and condition of the food served to the public. My staff and I will ensure the safety of all food and beverages stored, prepared and served at the above event.

signature of person in charge

date

Submit application with the licensing fee (if applicable) 10 working days prior to the event. Failure to submit the application and licensing fee within the required time frame will result in a \$100.00 fine or denial of a Temporary Food Service License.

Returned check fee \$25.00.

TAHD is an equal opportunity provider

**TAHD- TEMPORARY FOOD EVENTS REGISTRATION FORM
 APPLICATIONS & FEES MUST BE RECEIVED BY APRIL 1ST TO QUALIFY FOR DISCOUNT**

NAME: _____ **PHONE:** _____
 Courtesy of: Arthur H. Howland & Associates, P.C., Civil Engineers, Land Surveyors, Soil Scientists & Land Use Permitting!
 Call Us! (860) 354-9346 or visit <http://ahhowland.com> For More Info! (This Text Will Not Print When You Print Document)

NAME OF FOOD BOOTH(S) _____

EVENT	DATE(S)	TIME	LOCATION	# OF BOOTHS	1 DAY EVENT	TOTAL
					X \$40.00	
					X \$40.00	
					X \$40.00	
EVENT	DATE(S)	TIME	LOCATION	# OF BOOTHS	2-14 DAY EVENT	TOTAL
					X \$60.00	
					X \$60.00	
					X \$60.00	
					X \$60.00	
					X \$60.00	
					X \$60.00	
					SUBTOTAL:	
					MINUS 10% DISC.	
					AMOUNT DUE:	

List foods to be prepared: