

Comments: _____

- 7. Meat / Food Suppliers: Grocery Store Butcher Other _____
- 8. Cold- / Hot-Holding Facilities: Cooler With Ice Refrigerator Other _____
- 9. Hand Washing Facilities: Hand Sink Container with Spigot Other _____
- 10. All water used at temporary establishments must come from a clean, approved water source. All containers used to store or transport water must be clean and used only for storage and transportation of water.
- 11. Storage & Disposal of Wastewater: Mop/Utility Sink Toilet Other _____
- 12. **Food Protection During Preparation / Serving (All food shall be protected from customer handling, coughing, sneezing or other contamination. Methods of protection may include wrapping, the use of sneeze guards, or creating adequate spacing between food and the customers):**
- 13. **Food / Ice / Equipment / Single-Service Item Storage: (All of these items must be stored 6 inches off of the ground. Food and Ice must be covered. Ice used for cooling may not be used for consumption.)**
- 14. What will source of power be for equipment: Generator Municipal Power Other _____

All businesses and premises operated pursuant to this permit will be conducted and maintained in accordance with all relevant health statutes, ordinances, and regulations.

During the term of said permit, I and my employees will allow Health Department inspectors access to the premises to conduct such inspections as may be necessary to guarantee compliance with health codes. I specifically waive any right to demand the issuance of a search warrant or other investigative order prior to conducting such inspections.

I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior permission from the Utah County Health Department may void the temporary food service permit.

Signature of Applicant X _____

Amount of Fee:

Base Fee: \$25 x Number _____ of Stands = _____

Daily Fee: \$5 x Number _____ of days x Number of _____ Stands = _____

\$25 late fee assessed for **each permit** issued less than 2 days prior to event: = _____

TOTAL FEE: = _____

NOTE: There is a penalty fee of 100% of the original permit fee plus the \$25 late fee for opening / operating without a permit.

Permit # _____ Date Paid: _____ Reviewed by: _____

BOOTH SKETCH: (overhead or plan view) **Booth Sketch or Photo:** Below please provide a drawing of the food booth identifying and describing all equipment including handwash facilities, dishwash facilities, cooking equipment, refrigerators, worktables, food/single-service storage and hot & cold holding units. Indicate the type of structure for your booth. Indicate where the public will be served.

