



# Fort Wayne-Allen County Department of Health

200 E Berry Street, Ste 360 • Fort Wayne, IN 46802 • (260) 449-7561 • (260) 449-3010-Fax

## TEMPORARY FOOD ESTABLISHMENT PERMIT APPLICATION

All Food Establishments must comply with 410 IAC 7-24 and Allen County Code, Title 10, Article 2 at all times or be subject to the penalties therein.

THIS APPLICATION AND THE APPROPRIATE FEE MUST BE SUBMITTED TO THIS DEPARTMENT AT LEAST 24 HOURS OR ONE BUSINESS DAY PRIOR TO THE INTENDED DATE OF OPERATION. APPLICATIONS SUBMITTED LESS THAN 24 HOURS PRIOR TO THE EVENT ARE SUBJECT TO A PENALTY AS DEFINED IN ALLEN COUNTY CODE (Title 10, Article 2, Section 4-16). **EACH QUESTION MUST BE ANSWERED (on both sides of this sheet) IN ORDER FOR THIS APPLICATION TO BE PROCESSED.**

### **APPLICANT INFORMATION:**

Date of Application: \_\_\_\_\_ Name of Applicant: \_\_\_\_\_

Establishment or Organization: \_\_\_\_\_ Owner: \_\_\_\_\_

Establishment/Organization Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Establishment Telephone: \_\_\_\_\_ Email: \_\_\_\_\_ Contact Person: \_\_\_\_\_

### **EVENT INFORMATION:**

Name of Event: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

Organizer of Event: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

EXACT Location of Event: \_\_\_\_\_

Total # of Days of Operation: \_\_\_\_ Time Food preparation will begin: \_\_\_\_ Time Food will be served: \_\_\_\_

*(This is the time your inspection will take place)* ↑

### **FACILITY INFORMATION:**

**Type of Structure:**     Trailer     Tent     Booth     Inside Building     Other: \_\_\_\_\_

**Type of Water Service:**     Tank     Hose from Approved Source     Other: \_\_\_\_\_

**Do you have a Backflow Prevention Device?**     Yes     No     Not applicable

**Type of Power Source:**     Will plug into direct source     Generator     LPG     Other: \_\_\_\_\_

**Type of Handwashing:**     Sink     Thermos w/spigot     Urn     Other: \_\_\_\_\_

**Type of Dishwashing:**     3-Comp. Sink     Tubs/Buckets     Other: \_\_\_\_\_

Name of the Person-In-Charge at the event (for your establishment): \_\_\_\_\_

Name of Certified Food Handler: \_\_\_\_\_ Position: \_\_\_\_\_ Cert. Expiration: \_\_\_\_\_

*(Unless exempt from 410 IAC 7-22, you must attach a copy of the Certified Food Handler certificate to this application.)*

### **FOOD PRODUCT INFORMATION:**

Please list ALL FOODS AND BEVERAGES to be prepared, sold, or served: \_\_\_\_\_

Please list ALL MENU ITEMS that will be prepared at another location and brought to the event: \_\_\_\_\_

List the location at which the above-listed foods will be prepared: \_\_\_\_\_

<b><u>FEES:</u></b>	
1-2 days ..... \$ 45.00	9-10 days ..... \$225.00
3-4 days ..... \$ 90.00	11-12 days ..... \$270.00
5-6 days ..... \$135.00	13-14 days ..... \$315.00
7-8 days ..... \$180.00	<i>(days must be consecutive)</i>

**NOTE:** *Payments made by check that result in non-sufficient funds will result in the requirement for immediate payment to the Allen County Treasurer's Office (plus their additional NSF check fee) via cash, money order or certified check within 24 business hours. If payment is not received within 24 business hours of notification, no future permits will be issued until fees are paid in full.*

### **THIS IS A NON-REFUNDABLE FEE**

*Make all checks or money orders payable to the Fort Wayne-Allen County Department of Health.*

### **By signing below I agree to ALL terms and conditions listed on this permit application**

After you have read and understand the list of "Temporary Guidelines", sign here: \_\_\_\_\_



Signature of Applicant(s) or Corporate Officer: \_\_\_\_\_

Printed Name of Applicant(s): \_\_\_\_\_

Signature of Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

Date Event Organizer Contacted by Staff: \_\_\_\_\_ Staff Initials: \_\_\_\_\_

Notes: \_\_\_\_\_

Establishment #: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Clerk: \_\_\_\_\_

Date Entered: \_\_\_\_\_

# **INSPECTION POLICY**

***Due to repeated problems with vendors being late for inspections, the following policy has been adopted into the Ordinance for inspections of Temporary Food Establishments:***

- On the permit application form there is a space entitled "Time food preparation will begin" — this is the time the inspection will take place. Be sure to fill in the appropriate time that you will be on-site, set-up (with everything there including handwashing, dishwashing, etc.) and ready for inspection prior to food preparation.
- **IF YOU HAVE NOT BEEN INSPECTED, YOU MAY NOT OPEN. A RE-INSPECTION WILL ONLY OCCUR UPON THE FILING OF A NEW REQUEST FOR A TEMPORARY FOOD ESTABLISHMENT PERMIT DURING NORMAL BUSINESS HOURS (Mon- Fri, 8:00 a.m.- 5:00 p.m.).**
- If you open without a valid permit, you are subject to the penalties of Title 10, Article 2 (Allen County Food and Beverage Ordinance).

**IN ADDITION, the following will apply, in accordance with the Allen County Food and Beverage Ordinance:**

10-2-4-16 A. Should any permittee fail to obtain a Temporary Food Service Establishment or Temporary Food Market Establishment permit **twenty-four (24) business hours prior** to the scheduled date of operation, a penalty of **fifty dollars (\$50.00)** shall be assessed to the total fee amount of the permit for the first violation. Each additional such violation by the same permittee will carry a penalty that is escalated by an additional **\$25 each time**.

B. Should any permittee of a Temporary Food Service Establishment or Temporary Food Market Establishment fail to arrive at their designated location of operation **within one hour (1 hour)** of their designated time of operation, a penalty of **twenty-five dollars (\$25.00)** shall be assessed to the permittee payable within seven (7) days of the date of proposed operation. No future permits will be granted to the permittee until all outstanding penalty fees are paid in full.

.....

***I have read the above guidelines and agree to comply with them.***

  
**Signature of Applicant**

  
**Date**