

APPLICATION FOR PERMIT
TO OPERATE A
SPECIAL EVENT FOOD STAND

PENDER COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PO BOX 682
HAMPSTEAD, NC 28443

TAX EXEMPT NUMBER: _____

COMPANY NAME: _____

APPLICANT'S NAME: _____

APPLICANT'S ADDRESS: _____

APPLICANT'S PHONE NUMBER: _____

NAME OF FOOD STAND: _____

NAME OF SPECIAL EVENT: _____

LOCATION OF SPECIAL EVENT: _____

FOOD SUPPLIER'S NAME: _____

SUPPLIER'S ADDRESS: _____

Receipts of purchases must be made available at time of inspection. **NO RECEIPTS NO PERMIT!**

ALL WATER TANKS MUST BE EMPTY UNTIL INPECTION HAS BEEN COMPLETED!

A SCHEMATIC DIAGRAM OF YOUR FOOD STAND AND YOUR EQUIPMENT MUST BE ATTACHED TO THE APPLICATION (diagram to include hand wash sink, grills, refrigeration).

ATTACH A COPY OF THE MENU TO INCLUDE ALL FOOD AND DRINKS TO BE SOLD.

THIS APPLICATION MUST BE SUBMITTED IN CONJUNCTION WITH THE NORTH CAROLINA BLUEBERRY FESTIVAL FOOD VENDOR APPLICATION. ALL SUPPORTING DOCUMENTS MUST BE INCLUDED IN A SEPARATE PACKET FOR SUBMISSION TO THE PENDER COUNTY HEALTH DEPARTMENT. SUBMISSION DEADLINE IS: APRIL 4TH, 2008

SIGNATURE: _____ DATE: _____