



Seasonal/Concession Food Establishment Permit Application

Organization/Establishment: _____

Start Date: _____ End Date: _____

****YOU MUST CONTACT CONSUMER HEALTH TO SCHEDULE AN INSPECTION WHEN THE PERMIT EXPIRES****

Location/Address: _____

Does this facility have a hand washing sink? Yes/No Does this facility have a three-basin sink to wash utensils? Yes/No

Hours of operation: _____

Responsible Person: _____

Address _____ Cell Phone _____

Number of Employees/Volunteers: _____

Do you operate food establishments at other locations? Yes/No Location: _____

****The NRH Food Handler Training is offered **FREE** to seasonal/concession volunteers and is required for the seasonal/concession Coordinator(s)/Person(s) in charge****

Please visit nrhtx.com/class for more information on the Food Handler Training

Food Items and Preparation

(Due to cross contamination concerns, handling of *any raw meat* must be approved by Consumer Health)

Food Items to be Served

Food Preparation and Protection Methods

(Please list your menu including everything you will be serving including condiments, etc. and how the food cooked or reheated, how it will be held hot/cold, and how it will be protected from consumers):

Fee Required (Y)____ **\$138.00** (N)____ (with proof of Non-Profit status)

Applicant Signature _____ Date _____

Consumer Health Representative _____ Date _____

PERMIT IS VALID UP TO 4 MONTHS.

A NEW PERMIT AND HEALTH INSPECTION ARE REQUIRED EVERY SEASON.