LA PORTE COUNTY HEALTH DEPARTMENT

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EVENT APPLICATION

This completed event application is due in the Health Department at least 30 Days prior to the opening date of the event.

APPLICATIONS FOR VENDORS' TEMPORARY RETAIL ESTABLISHMENT PERMITS

MUST BE RECEIVED AT LEAST 7 DAYS PRIOR TO THE EVENT.

Application Date_____ **E-Mail Address:** _____

Event Name_____

Event Location_____
(Address if applicable)

City _____

Event Coordinator_____Phone_____E mail_____

Person in Charge_____Phone_____E mail_____
(of organizing the food booths)

Opening Date of Event_____ **Start Time**_____

Days / Hours of Operation_____

Source of water supply_____. **If the water supply is a well, the satisfactory results must be forwarded from a bacteriological test by a certified lab prior to the event.**

Source of electricity for food vendors_____

Waste water disposal location_____

♦   ♦   ♦   ♦
PLEASE COMPLETE THE LIST ON THE REVERSE SIDE IDENTIFYING EACH FOOD VENDOR,
CONTACT PERSON, AND PHONE NUMBER FOR THE VENDOR. IF VENDOR IS NON-PROFIT PLEASE
LIST.
(NON PROFITS DO NOT NEED A TEMPORARY APPLICATION OR LICENSE).

The LaPorte County Retail Food Establishment & Bed and Breakfast Establishment

Ordinance #13-15 states: Permits, "It is unlawful for a person to operate any Bed and Breakfast, Food establishment or food store or other food vendor in LaPorte County, without first obtaining a valid permit from the Health Officer."

◆   ◆   ◆   ◆

VENDOR NAME	CONTACT PERSON	PHONE NUMBER	E MAIL

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____

❖ VENDORS NOT READY AT THE DESIGNATED TIMES MAY NOT BE ABLE TO BE LICENSED AND WILL NEED TO REMOVE THEIR UNIT FROM THE EVENT.

❖ IT IS THE EVENT COORDINATOR'S RESPONSIBILITY TO ENSURE THAT UNLICENSED VENDORS DO NOT OPERATE.

❖ Temporary food service guidelines are available at www.laportecounty.org

❖ FAILURE TO MEET THESE REQUIREMENTS MAY RESULT IN THE INABILITY FOR FOOD VENDORS TO BE LICENSED AND SERVE FOOD AT YOUR EVENT

Signature_____ Date_____