

ENVIRONMENTAL HEALTH DEPARTMENT P.O. Box 2000 Lubbock, TX 79457 806 775 2928 FAX 806 775 3281

TEMPORARY FOOD SERVICE VENDOR PERMIT APPLICATION

DATE:	Date(s) of event or activity:		
	Time of Operation: FromTo		
IN ORDER FOR PERMIT TO BE PROCES	SSED, A COMPLETED	AND SIGNED APPLICA	ATION MUST ACCOMPANY PERMIT FEE
Name of Booth or Organization:			
Location of event or activity (street address)			
RESPONSIBLE PER	SON		
(MUST BE AVAILABLE THE DAY(S) OF EVENT FOR CONTACT BY ENVIRONMENTAL HEALTH) *REQUIRED *Name:		PERMIT MUST BE PAID NO LATER THAN 3 DAYS BEFORE EVENT IF EVENT IS ON SATURDAY OR SUNDAY PERMIT FEE MUST BE PAID NO LATER THAN WEDNESDAY 4:00 PM	
*Address:		PRIOR TO THE EVENT.IF EVENT HAS MORE THAN 3 BOOTHS, CALL OFFICE FOR DEADLINE. NO FOOD MAY BE PREPARED AT HOME. ALL FOOD IS REQUIRED TO BE PREPARED ONSITE OR AT AN APPROVED FACILITY. ALL EVENTS MUST BE APPROVED BY FIRE	
*City/State/Zip:			
*Phone:			
Alternate Phone:			RSHAL'S OFFICE. (806)775-2646
email:		NO REFUNDS WILL BE ISSUED.	
☐ Temporary Permit \$65.00 for the first NUMBER OF DAYS YOU WILL S PAYMENT METHOD ☐ Check # ☐ Cash	ERVE:	•	NT DUE:
FOOD ITEMS TO BE SERVED	L IVI/C L V	risa 🗀 Money O	PLACE OF PREP AND STORAGE
	x.us/departments/en	Checklist may be fou vironmental-health/ad BOVE WILL BE AI	dditional-resources
Applicants Drivers License No.:			State:
Applicants Signature:			Date:
FMO approval/signature:			Date: