REGISTRATION APPLICATION FOR A TEMPORARY RETAIL FOOD ESTABLISHMENT

Return completed form to:

Montgomery County Health Department
1580 Constitution Row Suite G
Crawfordsville, IN 47933
765-361-4126 (fax) 765-361-3239

Please complete a form for each separate operation.

410 IAC 7-24-107 PREREQUISITE FOR OPERATION

(a) **A person may not operate a retail food establishment without first having registered with the department as required under IC 16-42-1-6.**

(b) **A retail food establishment registered with a local health department or other regulatory authority shall be considered registered with the department under IC-16-42-1-6.**

(c) **To allow verification that the retail food establishment is constructed, equipped, and otherwise meets requirements of this rule, the regulatory authority shall be notified of an intent to operate at least thirty (30) days prior to registering under this rule.**

ESTABLISHMENT OWNER INFORMATION			
Establishment Owner's Name			
Mailing Address (*number and street)*			
City	State	ZIP Code	County
E-mail	Telephone Number	Fax Number	

ESTABLISHMENT INFORMATION			
Establishment or Organization		Certified Food Handler	
Establishment or Organization Address (*number and street)*			
City	State	ZIP Code	County
E-mail	Telephone Number	Fax Number	

EVENT INFORMATION				
Event Name				
Event Contact			Telephone Number	
Date(s) of Event (*month, day, year*)			Hour(s) of Event	
Food to be Served				
Location of your operation during this Event: _____				
Type of structure (*check one):* □ Trailer □Tent □ Cart □ Booth □ Other: _____ □ Stock truck: □ Prep truck:				
Providing Samples to the Public? □Yes □No				
Food Prep / Storage at location other than Event Location? □Yes □No (*If Yes, provide Other Site address.*)				
(Street)	*(City)*	*(State)*	*(ZIP Code)*	*(County)*
Fees: 1-3 Days: $20.00 Each Additional Day: $5.00 *(Days must be consecutive)*			Total Numbers of Days: _____ **Total Fees Due**: _____	

Original Signature of applicant	Date *(month, day, year)*
Printed name of applicant	Title