Sandra Deausy, M.D. Health Officer Amanda J. Lahners, REHS/RS Administrator



EVENT APPLICATION

This completed event application is due in the Health Department at least <u>30 Days prior</u> 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 results must be forwarded from	If the n a bacteriological test b	e water supply is a well, the by a certified lab prior to th	e satisfactory e event.
Source of electricity for food v	endors		
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."

V	END	OR NAME	CONTACT PERSON	PHONE NUMBER	E MAIL
1. _					
2. _					
4. _					
7. _					
12.					
		VENDORS NOT F	READY AT THE DESIGNATED TIM /E THEIR UNIT FROM THE EVENT	ES MAY NOT BE ABLE TO BE L	
	*	IT IS THE EVENT NOT OPERATE.	COORDINATOR'S RESPONSIBIL	ITY TO ENSURE THAT UNLICEN	ISED VENDORS DO
	*	Temporary food	service guidelines are available at	www.laporteco.in.gov	
	*		ET THESE REQUIREMENTS MAY I D AND SERVE FOOD AT YOUR EV		FOOD VENDORS
s	ignat	ture		Date	