



TREMPEALEAU COUNTY PUBLIC HEALTH
 36245 Main Street, PO Box 67
 Whitehall, WI 54773
 (715) 538-2311 X220 (715) 538-4861 Fax

For Office Use Only:	
Amount paid	_____
Date paid	_____
Permit Issued	_____

TEMPORARY FOOD SERVICE PERMIT APPLICATION

1. Before completing this application, read Temporary Restaurant Guidelines. Have you read this material? yes no

Establishment/Org. Name Operator/Contact Name Contact Mailing Address Contact Telephone	_____

	STREET _____
	CITY STATE ZIP _____
()	

Specify Event(s) you plan on attending – Include locations and dates of events (If additional space is needed attach a separate sheet listing the events, locations & dates)	Name of Event: _____	Name of Event: _____
	Location: _____	Location: _____
	Date(s): _____	Date(s): _____

2. List all food items, where the food was purchased from, indicate how the food will be prepared, and indicate where the food will be prepared. (add additional sheet of paper if needed)

Food Item	Where Purchased	How Prepared*	Where Prepared**	Comments

*How prepared includes but is not limited to: cooked, fried, grilled, baked, reheated, cooled, hot hold, cold hold, mixed, cut, sliced, assembled, breaded, other.

**All food must be prepared in the temporary food stand or a licensed facility (NO home prepared foods).

3. Describe how you will do the following:

Cold Storage of Food	_____
Hot Holding of Food	_____
Source of Water	_____
Storage and Disposal of Wastewater	_____
Storage and Disposal of Garbage	_____

4. Draw a sketch of the proposed food stand. Include location and identification of equipment including hand washing site, grills, hot holding equipment, refrigeration units, work tables, food storage, single service article storage, etc.



Hand wash

- Provide a cooler with spigot and 5 gallon catch bucket.
- Pump soap
- Disposable Towels
- Waste receptacle

Sanitizer:

- Provide a bucket with warm water and 100 ppm chlorine. (1 capful of bleach to 1 gallon of water=100 ppm)

Disposable Gloves

- Provide disposable gloves for persons handling food.

Temperatures shall be:

- Cold holding 41°F or below
- Hot holding 135°F or above

Provide an accurate thermometer with a range of 0°F to 220°F to check food temperatures.

5. Completed applications and \$75.00 license fee must be received at Trempealeau County Public Health at least 14 days prior to the event. This stand may be inspected by the Trempealeau County Environmental Health Specialist at anytime during operation and must adhere to the Wisconsin Food Code.

YOUR SIGNATURE BELOW ACKNOWLEDGES THAT YOU HAVE RECEIVED AND READ A COPY OF TEMPORARY RESTAURANT GUIDELINES. YOUR SIGNATURE ALSO CERTIFIES THAT YOU ARE FAMILIAR WITH THE WISCONSIN FOOD CODE GOVERNING SANITATION IN RESTAURANTS, AND THAT THE ABOVE-DESCRIBED ESTABLISHMENT WILL BE OPERATED AND MAINTAINED IN ACCORDANCE WITH APPLICABLE REGULATIONS.

SIGNATURE OF OPERATOR OR CONTACT PERSON

TITLE

TODAY'S DATE