## **TEMPORARY FOOD LICENSE AND INSPECTION REQUEST**



## Elkhart County Health Department 4230 Elkhart Road, Goshen, IN 46526

Phone: 574-971-4600 Fax: 574-971-4599

All food Establishments must comply with 410 IAC 7-24 and Elkhart County Food Ordinance 2005-322. THIS REQUEST MUST BE SUBMITTED TO THIS DEPARTMENT 30 DAYS PRIOR TO THE INTENDED DATE OF OPERATION. EACH QUESTION MUST BE ANSWERED IN ORDER FOR THIS REQUEST TO BE PROCESSED.

APPLICANT INFORMATION		Date of Request:		
Owner Name:				
Establishment Name:				
Mailing Address:				
(Street	t)	(City)	(State)	(Zip Code)
Telephone:Contact Person:		EIIIaii:		
EVENT INFORMATION Name of Event:			Date(s) of Event:	
Name of Event: Exact Location of Event:				
Exact Education of Event.	(Street)	(City)	(Zip Code)	
Total # of Days of Operation: _	Time of Ev	ent: Hou	urs of Operation:	
Time food preparation will beg	gin (Inspection and lic	ensing must occur befor	e this time):	
Inspection Request Date:	Ti	me:	<del></del>	
<b>ELKHART COUNTY IS LOCATED</b>	IN THE EASTERN TIN	ME ZONE AND OBSERVE	S DAYLIGHT SAVINGS	TIME
FACILITY INFORMATION				
Type of Structure:	iler □ Tent	☐ Inside Building	□ Other:	
Type of Water Source: □ Tan	k □ Hose fro	m Approved Source	□ Other:	·
Type of Power Source: □ Will Describe wastewater holding a				
Will you be preparing food on site?	site or only heating/h	nolding and serving foods		
IF PRE-MADE FOODS ARE NOT SERVICE LICENSE FROM THE F. List your food suppliers	FROM COMMERCIA ACILITY WHERE THE	L FOOD SUPPLIERS YOU FOODS ARE PREPARED.		Y OF THE FOOD
Name of Certified Food Manag	Certification #			
Please List ALL foods and beve				
Licensing fees are graduated in conjunction with a single event Temporary food establishment inspection. Inspectors do not designed.	t or celebration. Please license fees must be p	refer to the Elkhart County aid by cash or check payab	Fee Ordinance for the colle to <b>Elkhart County Tre</b>	current fee amounts. asurer <mark>at time of</mark>
The undersigned is requesting	a temporary license	to operate a temporary f	ood service establishr	nent pursuant to ISDH
Retail Food Establishment Sani	itation Requirements	in 410-IAC 7-24 and Elkh	nart County Ordinance	2005-322 Submitting
this application does not guara	antee a license will be	e issued.		
Printed Name:				
Signature:		Date:		