

**TEMPORARY FOOD SERVICE FACILITY  
PERMIT APPLICATION**

**Prince George's County Health Department  
Department of Permitting, Inspections & Enforcement**  
9400 Peppercorn Place, Largo, Maryland 20774  
Office 301-883-7690 | TTY/STS Dial 711

**PLEASE READ CAREFULLY**

<b>INSTRUCTIONS</b>	<ul style="list-style-type: none"> <li>◆ Type or print. All blanks must be filled in, if applicable, and the application must be signed.</li> <li>◆ Applications must be submitted a minimum of <b>5 business days</b> prior to the event.</li> <li>◆ Send the application fee to the address above, in the form of a check or money order made payable to: "Prince George's County."</li> </ul> <p>Check type of operation:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Multiple Day Temporary Event \$125 + 5% Technology Fee of \$6.25 for a total of \$131.25 (days must be consecutive)</b></li> <li><input type="checkbox"/> <b>Single Day Temporary Event \$125 + 5% Technology Fee of \$6.25 for a total of \$131.25</b></li> <li><input type="checkbox"/> <b>Multiple Day Temporary Event-Government Sponsored \$75 + 5% Technology Fee of \$3.75 for a total of \$78.75 (days must be consecutive)</b></li> <li><input type="checkbox"/> <b>Single Day Temporary Event-Government Sponsored \$75 + 5% Technology Fee of \$3.75 for a total of \$78.75</b></li> <li><input type="checkbox"/> <b>Non-Profit Organization NO CHARGE (Must submit proof of non-profit status and booth must be staffed by members of the organization).</b></li> </ul> <ul style="list-style-type: none"> <li>◆ If you need assistance filling out this application, please call 301-883-7690.</li> <li>◆ <b>OPERATING WITHOUT A HEALTH DEPARTMENT PERMIT IS SUBJECT TO A \$1000.00 FINE.</b></li> </ul>		
<b>APPLICANT INFORMATION</b>	Trading Name of Applicant		Applicant Phone Number
	Name of Applicant		Applicant Cell Phone Number
	Applicant Mailing Address	<i>Number</i>	<i>Street</i>
	<i>City</i>		<i>State</i>
			<i>Zip Code</i>
<b>EVENT INFORMATION</b>	Event Name		Event Date
	Event Location		Set-up Time
	Event Coordinator and Phone #		E-mail Address
<b>FOOD PREPARATION</b>	<p><b>Use the following section to describe your food operation. Each section must be completed. In each area CHECK ALL THAT APPLY.</b></p>		
	<p><b>Food at this event will be prepared</b></p> <p><input type="checkbox"/> inside a building   <input type="checkbox"/> outside in a truck or cart   <input type="checkbox"/> outside under a tent or canopy</p>		
	<p><b>Source of food</b></p> <p><input type="checkbox"/> wholesale store(s) or distributor(s) Name(s): _____</p> <p><input type="checkbox"/> retail store(s) Name(s): _____</p>		
	<p><b>Food will be prepared</b></p> <p><input type="checkbox"/> on-site before or during the event</p> <p><input type="checkbox"/> in the following licensed food service facility (include name and address):</p> <p>_____</p>		
	<p><b>Hot or cold food will be transported to the event</b></p> <p><input type="checkbox"/> in insulated containers   <input type="checkbox"/> in coolers with ice   <input type="checkbox"/> in a temperature controlled truck or appliance   <input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> No food requiring temperature control will be served.</p>		
	<p><b>Cooking equipment used</b>   <input type="checkbox"/> no food will be cooked at event</p> <p><input type="checkbox"/> deep fryer   <input type="checkbox"/> gas grill   <input type="checkbox"/> oven   <input type="checkbox"/> rice maker   <input type="checkbox"/> stove or burners   <input type="checkbox"/> steamer   <input type="checkbox"/> Other _____</p>		
	<p><b>Food will be held hot</b>   <input type="checkbox"/> on a grill, stove or other cooking device</p> <p><input type="checkbox"/> in chafing dishes   <input type="checkbox"/> under a heat lamp or in a warmer   <input type="checkbox"/> No food will be kept hot   <input type="checkbox"/> Other _____</p>		

