

Event Information

Event Name _____
 Event Coordinator _____
 Location _____
 Set-Up: Date: ___/___/___ Time _____
 Start Food Sales: Date: ___/___/___ Time _____
 End Food Sales: Date: ___/___/___ Time _____

Vendor Information

Organization/Business Name _____
 Contact Name _____
 Mailing Address _____
 City _____ State: _____ Zip _____
 Phone: _____ Cell: _____ Fax: _____
 E-mail address: _____

Planned Operation

1. Do you have access to a local kitchen? If so, where?
2. Do you have a NC permit for a pushcart or mobile food unit? Please give the name of your permitting health department or establishment id number.
3. Will you prepare any food away from the festival booth? *(If yes, attach local health department approval or give in-county location.)*
4. Will you prepare any food away from the festival booth at a facility you do not own? *(If yes, attach a letter from the permit holder allowing you to use the facility.)*
5. Are you exempt from Federal Income Tax or incorporated as a non-profit organization? *(If yes, attach a letter showing your tax exempt id number or a copy of your articles of incorporation.)*
6. Are you a political group? *(If yes, attach a letter from the candidate or political organization.)*

PLEASE LIST ALL FOOD TO BE SERVED. Include how you plan to keep potentially hazardous food or drink hot (135° F or greater) and cold (45°F or less).

FOOD ITEM	WHERE PREPARED	COOKING PROCEDURES (such as propane or electric; deep fry, grill, microwave, stove, etc.) Indicate temperature control method (refrigeration, coolers, hot holding)	SUPPLIER INFORMATION
BBQ	Name of approved kitchen or commercially packaged	Purchased frozen from supplier. On-site, thawed and held in refrigerator at 45°F or less, then heated on propane stove to 165°F. Held above 135° on steam table.	"Porky's BBQ" 101 State St. Pork City, NC 704-123-3456

MENU ITEMS ARE SUBJECT TO APPROVAL AND MAY BE RESTRICTED.