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County License



FEE - \$50.00

**CITY OF HOPKINS  
TEMPORARY FOOD SERVICE INFORMATION FORM**

Event \_\_\_\_\_

Location \_\_\_\_\_

Date/s and Time \_\_\_\_\_

Person in Charge \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number (home) \_\_\_\_\_ (work) \_\_\_\_\_

Licensed Commissary \_\_\_\_\_

List all planned food and beverages: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

When and where will food be prepared/stored prior to and during the event?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Equipment to be used at the event for cooking/hot holding foods above 150 degrees F.

\_\_\_\_\_

\_\_\_\_\_

Refrigeration equipment to be used at the event to keep food cold, below 40 degrees F.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(OVER)

Method of transporting food (food storage containers, hot holding units, insulated containers, Other) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Facilities for hand washing \_\_\_\_\_  
\_\_\_\_\_

Facilities for utensil washing \_\_\_\_\_  
\_\_\_\_\_

Sanitizer to be used \_\_\_\_\_

Source of potable water for food stand or vehicle \_\_\_\_\_  
\_\_\_\_\_

Method of discharging waste water \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

For office use only

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved  Yes  No

\_\_\_\_\_  
Signature of Health Inspector