

CITY OF IRVING - TEMPORARY FOOD EVENT APPLICATION

Permit # FT-_____

Please complete and return this application and applicable fee (**\$50 fee + \$5 a day per booth**)**BY MAIL** - City of Irving - Inspections Department, P. O. Box 152288, Irving TX 75015-2288**IN PERSON** - Inspections Department, 825 W. Irving Blvd., 2nd Floor, Irving TX 75060**PLEASE READ THE BELOW GUIDELINES BEFORE SUBMITTING THIS APPLICATION**

- TEMPORARY FOOD PERMITS ARE ONLY ALLOWED IN CONJUNCTION WITH A SINGLE EVENT OR CELEBRATION
- **ALL MENU ITEMS MUST BE APPROVED BY THE CITY OF IRVING INSPECTIONS DEPARTMENT PRIOR TO THE PERMIT BEING APPROVED.** Contact Inspections at 972-721-2371 for more information
- All temporary food event guidelines must be followed or subject to permit suspension. The guidelines are available on the Inspections Department website at www.cityofirving.org
- **Applications received less than 3 full working days prior to the event are subject to a \$50 late fee**
- Foods that require extensive preparation or cooking must be prepared at a licensed food establishment
- One person must be on-site at all times during the event that has an accredited food handler or food manager certification. The certification shall be submitted to the department prior to a permit being approved

PERMITTED FOOD ESTABLISHMENTS

- A copy of the food permit and a copy of the most recent health inspection report from the licensed food establishment being used to prepare food for the event is required prior to the permit being issued (except Irving, TX licensed locations)

ON-SITE FOOD PREPARATION (UNLICENSED FACILITIES)

- Foods may be prepared on-site if the foods require limited preparation and are approved by the department
- All time controlled for safety foods (TCS foods) must be obtained the day of the event, receipts must be kept on-site
- If receipts of TCS foods are not provided, the department may prohibit the use of those foods at the event

EVENT INFORMATION <input type="checkbox"/> \$50 late fee (application received less than 3 full working days prior to the event)		
# of booths	Event name	Event location address
Reason for event: <input type="checkbox"/> festival <input type="checkbox"/> carnival <input type="checkbox"/> fund-raiser <input type="checkbox"/> public exhibition <input type="checkbox"/> celebration <input type="checkbox"/> sporting event <input type="checkbox"/> _____		
Dates / times of event (if extensive, submit a separate list)		
List of food and beverage items / location of where each item will be prepared (if extensive, submit a separate list)		
Equipment to be used for maintaining hot and cold temperatures if applicable (if extensive, submit a separate list)		
Sanitizer type: <input type="checkbox"/> chlorine <input type="checkbox"/> quaternary Flooring type: <input type="checkbox"/> concrete <input type="checkbox"/> asphalt <input type="checkbox"/> plywood <input type="checkbox"/> platforms <input type="checkbox"/> tarps <input type="checkbox"/> mats		
UNLICENSED FACILITY (FOOD PREPARATION ON-SITE) <input type="checkbox"/> food handler or food manager certification received		
Facility name		Phone
Facility address		Facility email
PERMITTED FOOD ESTABLISHMENT <input type="checkbox"/> Mobile food unit <input type="checkbox"/> Mobile unit commissary note <input type="checkbox"/> Permanent food establishment		
Business name		Email
Facility address		Phone
City / State / Zip		
<input type="checkbox"/> copy of food permit <input type="checkbox"/> copy of most recent health inspection report (if located outside of Irving, TX)		
PERSON IN CHARGE ON-SITE *Person in charge is subject to citations for violations of city ordinance that occur		
Full name		Govt. photo identification (Type / ID #)
Home address		Cell phone
City / State / Zip		Date of birth
FOOD HANDLER / FOOD MANAGER INFORMATION		
Name		Work title
		Expiration date
THE APPLICANT IS NOT ENTITLED TO A REFUND OF PERMIT FEES IF A PERMIT IS NOT APPROVED BY THE DEPARTMENT		
I verify that all the submitted information above is accurate.		
Applicant Signature		Date
Print Name		

Staff initials_____ Temporary food permit guidelines issued to applicant in person email mail