



City of Stafford

2610 South Main
(281) 261 3941

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Stafford, Texas 77477
Fax: (281) 261 3939

Temporary Food Establishment Application

Permit #:

Event Name		
Location of Event:		
Event Start Date:	Event End Date:	Event Time:
Event Coordinator:		
Event Coordinator Tel #	Cell#	
Event Coordinator Email:		
Total Number of Vendors:		
Vendor Set Up Time:		

Name of Vendor & Booth Name (use sheet of paper for additional vendors)	Address:	Tel:

****Coordinator – In submitting this application form all Vendors in charge of the Temporary Food Booth, understand and agree to the City of Stafford Codes and the State of Texas Health Codes. Failure to comply with these regulations may result in immediate revocation of your permit.**

<p>Non-Profit Organizations are exempt from the Organizer Fee. A copy tax status must accompany application.</p> <p>Event Coordinator is responsible for returning ALL the Temporary Establishment forms and the Permit Fees to the City of Stafford Health Department no later than ONE MONTH PRIOR to the event, in order for the Health Inspector to review the provided documents.</p>	Event / Organizer Fee Not for profit organization-No Fee	\$150.00	
	Vendor / Booth Each Day		
	Total # of days _____ X	\$25.00	
TOTAL DUE			

Accepted By:	Receipt Number:
Approved by:	Date:
Signature of Event Coordinator:	Printed Name:

