

**TEMPORARY EVENT
SPECIAL FOOD SERVICE FACILITY (Class II)
PERMIT APPLICATION**

**Prince George's County Health Department
Environmental Health**

Largo Government Center | 9201 Basil Court, Suite 318
Largo, Maryland 20774-5310
Office 301-883-7690 | Fax 301-883-7601
TDD for the hearing impaired 301-883-5025

PLEASE READ CAREFULLY

INSTRUCTIONS	<ul style="list-style-type: none"> ◆ Application fee is non-refundable ◆ Type or print in black ink. All blanks must be filled in, if applicable, and the application must be signed. ◆ Send the application fee to the address above, in the form of a check or money order made payable to: "Prince George's County Health Department." ◆ Check type of operation: <ul style="list-style-type: none"> <input type="checkbox"/> Multiple Day Temporary Day Event \$75.00 <input type="checkbox"/> Single Day Temporary Event \$75.00 <input type="checkbox"/> Single Day Temporary Event \$25.00 (If application is <u>received</u> 14 or more calendar days before the event) <input type="checkbox"/> Special Food Service Facility/Non-Profit Organization NO CHARGE (Must submit proof of non-profit status and booth must be staffed by members of the organization) ◆ Incomplete applications will be returned for corrections/completion and will delay issuance of permit. ◆ Permits must be issued prior to preparation or sale of food. ◆ If you need assistance filling out this application, please call 301-883-7690. ◆ The permit application must be received at least (2) days prior to the event to guarantee inspection. ◆ OPERATING WITHOUT A HEALTH DEPARTMENT PERMIT IS SUBJECT TO A \$300.00 FINE. 			
APPLICANT INFORMATION	Trading Name or Organization		Applicant Phone Number	
	Name of Applicant		Applicant Cell Phone Number	
	Applicant Mailing Address	Number	Street	
	City	State	Zip Code	
	Foods Being Served by Applicant			
EVENT INFORMATION	Name of Event		Event Date	
	Event Address / Location	Number	Street	
	City	State	Zip Code	
	Event Coordinator/Contact Person	Daytime Phone No.	E-mail Address	
PLEASE SIGN	<ul style="list-style-type: none"> ◆ <i>I have examined and read the above application and know the same is true and correct, and that in operating a food service facility, I agree to comply with all applicable laws and regulations including, but not limited to, the State of Maryland and Prince George's County.</i> ◆ <i>I understand that falsification of this application may result in the denial, suspension or revocation of the permit.</i> <p style="text-align: center;"> </p> <p style="text-align: center;"> <i>Applicant Signature</i> <i>Printed Name of Applicant</i> </p>			

Do Not Write Below This Line

FOR OFFICE USE ONLY	Date of Approval	Receipt Number	Amount Received	Date Received	Facility Number
	Approved By	Permit Number	Date Permit Issued	Expiration Date	