



PIEDMONT HEALTH DISTRICT, 111 South St., 1st Floor, Farmville, VA 23901

Ph: 434-392-3984

Amelia Health Dept. P.O. Box 392 Amelia, VA 23002 804-561-2711

Charlotte Health Dept. P.O. Box 670 Charlotte Courthouse, VA 23923 434-542-5251 Lunenburg Health Dept. 11387 Courthouse Rd. Lunenburg, VA 23952 434-696-2346 Prince Edward H.D. 111 South St. Ground Flr. Farmville, VA 23901 434-392-8187

Buckingham Health Dept. P.O. Box 198 Buckingham, VA 23921 434-969-4244 Cumberland Health Dept. P.O. Box 107 Cumberland, VA 23040 804-492-4661 Nottoway Health Dept. P.O. Box 27 Nottoway, VA 23955 434-645-7595

## APPLICATION FOR A TEMPORARY RESTAURANT PERMIT

Applications must be submitted a minimum 14 days prior to event to the local Health Department in the county where the event is being held.

## (PLEASE PRINT OR TYPE)

Date of Application:			
Name of Organization or Indi	vidual:		
Mailing Address:			
Representative:			
Telephone #'s: work			
Event Name:			
Event Location:			
Dates of Operation:	Time(s)	to	
Type of Food Facility:(E	Beverage Wagon, Booth, Tent, Kito	chen, etc.)	
Effective July 1, 2011. Vendon and must be included with app	Fee is \$40 per event (to a m	aximum of \$40 a calendar y	ear
Churches, fraternal, school, & squads are exempt from the ve		eer fire departments & rescu	ıe
Water Service	Sewage Disposal_	1	
Solid Waste Disposal	Liquid Wast	e Disposal	

## List all food & beverage items below. (Use separate page for additional information)

Food/Beverage  Example: Hamburgers Tomatoes & onion		Source Address  Food Distributor Local Market		Where Prepared On site On site		Methods of Preparation, Serving & Equipment used Cooked to 170'F & held in pan on grill. Washed, sliced & held in cooler.	
Hand Washing Methods	The same of the contract of th		List All Utensils, How Cleaned, Describe Sanitizer		Refrigeration Type		List All Cooking Equipment
Example: Prepackaged mustard, ketchup, etc.		Tongs, spatula, knife, ice scoop Bleach & water sanitizer		Cooler with ice & thermometer		Electric grill, steam table, deep fat fryer, hot plate	
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	• 50,8103/134	r - allere sea coma acua		Lee eggo graterio por <b>h</b> et esta su pa	D V. Saturation .	0.00	
Please call us pr changes in your			mple: ad	ditional menu it	7 - A	cation & n	otify us of any
I have read the a requirements. I or permit suspe	und	erstand that f	ons, und				
Representative's	s Sig	nature			Date	:	