



# BRAZOS COUNTY HEALTH DISTRICT

201 NORTH TEXAS AVENUE • BRYAN, TEXAS 77803

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## TEMPORARY FOOD SERVICE PERMIT APPLICATION

**ALL FOOD MUST BE PREPARED ON-SITE\***

Permit Fee	
<input type="checkbox"/>	\$60 (1-3 days)
<input type="checkbox"/>	\$95 (4-6 days)
<input type="checkbox"/>	\$150 (7-14 days)
*Additional \$60 applied to applications not submitted 72 hours prior to event	

From: \_\_\_\_\_ 20\_\_\_\_ To: \_\_\_\_\_ 20\_\_\_\_

Type of Temporary Event: \_\_\_\_\_

Location of Event (Must be Non-Residential): \_\_\_\_\_

Name & Address of Establishment or Organization: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Operator or Contact Person: \_\_\_\_\_

Operator's Email: \_\_\_\_\_

List of foods to be prepared or served: \_\_\_\_\_

Start preparing at (time): \_\_\_\_\_ Serving at (time): \_\_\_\_\_

All time and temperature control for safety food (TCS) must be purchased and/or prepared in Brazos County. Receipts need to be kept to show proof of purchase. If any food is to be prepared at another location, it must be permitted in Brazos County. List name of permit holder and when that site will be used. \_\_\_\_\_

*Temporary Event Applications must be submitted to our office at least **72 hours prior** to the event. If not turned in prior to 72 hours you will NOT be issued a permit.*

**FEE PAYABLE TO:**

**PUBLIC HEALTH (cash, money order, local check, or credit card (fee applies) accepted**

**\* NO REFUNDS \***

**(NO FEES FOR ESTABLISHMENTS CURRENTLY PERMITTED IN BRAZOS COUNTY)**

*\*If conditions for the temporary permit are not met this permit will be revoked.*

Date of Application: \_\_\_\_\_

\_\_\_\_\_  
Signature of applicant

*FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE*

Receipt Number: \_\_\_\_\_ Initials: \_\_\_\_\_

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

**I AGREE TO FOLLOW THE RULES/REGULATIONS SET FORTH BY THE BRAZOS COUNTY HEALTH DISTRICT (BCHD) FOR TEMPORARY FOOD EVENTS. I UNDERSTAND THAT IF THESE RULES ARE NOT FOLLOWED, BCHD INSPECTORS CAN TERMINATE THE FOOD EVENT AND/OR ISSUE AN ADMINISTRATIVE FINE (\$60.00 RE-INSPECTION FEE). I UNDERSTAND THAT I MUST SET UP PRIOR TO BEGINNING ANY FOOD PREPARATION, AND THAT I MAY BE INSPECTED AT ANY TIME DURING THE EVENT.**

FOOD SERVICE APPLICANT \_\_\_\_\_

PHONE NUMBER OF RESPONSIBLE PARTY \_\_\_\_\_

INSPECTOR \_\_\_\_\_

EMAIL \_\_\_\_\_