



116 W. Bridge Street, Granbury Texas 76048 – (817)573-1114

## **TEMPORARY FOOD SERVICE ESTABLISHMENT APPLICATIONS**

The Health Department must receive applications at least one (1) week prior to the event. A late fee will be assessed if the completed application and appropriate fee are not received within 3 full working days prior to the event.

**Event Name** \_\_\_\_\_ **Location** \_\_\_\_\_  
**Event Coordinators Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Organization/Business Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Mailing Address** \_\_\_\_\_  
**Applicant Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Email** \_\_\_\_\_  
**Dates of Operation** \_\_\_\_\_ **Hours of Operation** \_\_\_\_\_

Please list all foods to be prepared, where the food will be purchased, whether it is prepared off-site or on-site, and whether it will be held cold or hot. Attach an additional sheet if necessary. Only items listed will be approved for service. Any changes must be approved prior to the event.

Food/Beverage Item	Where Purchased	Off-Site Prep Y / N	On-Site Prep Y / N	Hot Holdi ng Y / N	Cold Holdi ng Y / N

**Will Advanced Preparation of Food Occur?**

☐ Yes

☐ No

### **Temperature Control**

- Will Metal-Stem Thermometers (0-220°F) Be Used? ☐ Yes ☐ No
- What Type of Cold Holding Equipment Will Be Used? ☐ Yes ☐ No  
☐ Refrigerator ☐ Freezer ☐ Other \_\_\_\_\_
- What Type of Cooking Equipment Will Be Used?  
☐ Stove ☐ Oven ☐ Fryer ☐ Grill ☐ BBQ ☐ Other \_\_\_\_\_
- What Type of Hot Holding Equipment Will Be Used?  
☐ Steam Table ☐ Oven ☐ Roaster Oven ☐ Other \_\_\_\_\_
- On Site Power Source.

☐ Electricity   ☐ Propane   ☐ Other \_\_\_\_\_

**Hand Washing Facilities In The Booth\***☐ Plumbed Sink☐ Temporary Hand Washing Sink

*\*As a minimum, you must provide two (2) gallons of warm water in an insulated container with a spigot, a bucket for wastewater, pump-type liquid soap, and paper towels.*

**Dish Washing Facilities**☐ 3-Compartment Sink☐ 3 Wash Basins**Water Source**☐ Municipal☐ Other \_\_\_\_\_**Wastewater Disposal**☐ Sewer☐ Holding Tank☐ Other \_\_\_\_\_**Garbage Disposal Method**☐ Cans☐ Dumpster(s)**Restroom Facilities Must Be Within 200 Feet of the Booth. Describe location and type.**

I certify by my signature, that I am the owner of the establishment or his/her designee. I further certify that I grant permission to allow the Health Officer and/or his/her representative(s) to enter said establishment at their discretion for the purpose of application, evaluation, pre-operational inspection, routine inspection or any subsequent inspections or investigations. I understand if food is suspected of being contaminated and a threat to public health and/or in violation of 25 TAC §§ 229.161-229.171, 229.173-229.175, said food will be voluntarily removed from human food channels by myself and/or my designee in the presence of the Health Officer. I understand that any food service operating permit may be immediately suspended or revoked for failure to comply with the City of Granbury regulations and 25 TAC §§ 229.161-229.171, 229.173-229.175. In the event of suspension or revocation of my food service permit, I will be required to immediately cease and desist all food service operations until such time as a new permit, or continued operation is authorized by the Health Officer.

\_\_\_\_\_  
Applicant's Signature\_\_\_\_\_  
Date**Fees: All Food Booths: Day 1- \$35.00**

Additional Days \$15.00 each

**If not purchased 3 working days prior to event \$20.00 per vendor request****FOR DEPARTMENT USE ONLY****Provide Food Flow for All Menu Items****ITEMS DISCUSSED WITH APPLICANT:**☐ Transport of food to site☐ Proper Glove Use☐ Hot Holding  
up☐ Dish Wash Set-☐ Booth Construction☐ Sanitizer Used☐ Utensil Use/Availability☐ Hand Wash Set-Up☐ Thermometer Use☐ Condiment Dispensing

☐ Hand Washing Procedure

☐ Cold Holding

☐ Supervisor on site