



# TRINITY COUNTY

**BUILDING AND DEVELOPMENT SERVICES**  
**Environmental Health Division**  
61 Airport Road  
P.O. Box 476  
Weaverville, CA 96093

## TEMPORARY FOOD FACILITY PERMIT APPLICATION

**Permit Fee: \$62. Submit fee with application no later than 7 days prior to event.**

NAME OF EVENT, LOCATION, SPONSOR & DATES EVENT WILL OCCUR: \_\_\_\_\_

NAME OF OWNER, OPERATOR, BUSINESS, CONCESSION OR GROUP: \_\_\_\_\_

MAILING ADDRESS TO RECEIVE PERMIT: \_\_\_\_\_

Telephone Numbers: \_\_\_\_\_

Non-Profit Organizations are exempt from fee. If known, provide Tax I.D.# \_\_\_\_\_

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DESCRIBE FOOD & BEVERAGES TO BE SOLD: \_\_\_\_\_

Equipment to maintain proper food temps (COLD FOODS 41 F or less, HOT FOODS 135 F or higher): \_\_\_\_\_

Food Preparation Location: ( ) On site in Food Booth Enclosure ( ) Off site at Permitted Facility in Trinity County or other county (state name of facility): \_\_\_\_\_

**>>>NOTE: NO HOME FOOD PREPARATION ALLOWED <<<**

**Conditions of Approval:** Following a review of complete and satisfactory application information and/or booth inspection, an approved copy of this form shall be issued as a permit-to-operate. The facility must be operated in accordance with the *CALIFORNIA RETAIL FOOD CODE / California Health & Safety Code*.

As the Owner \_\_\_\_, Operator \_\_\_\_, Manager \_\_\_\_, of this food facility, I certify that should a permit be granted, I shall observe the *CALIFORNIA RETAIL FOOD CODE*. I also agree that representatives of the Trinity County Environmental Health may make inspections during the hours when the business is open to the public.

✓ \_\_\_\_\_

**Applicant's Signature**

**Date**

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PERMIT APPROVED ON: \_\_\_\_\_ EXPIRES: End of Event -

BY: \_\_\_\_\_ OTHER CONDITIONS OF APPROVAL: \_\_\_\_\_

Building Inspection Division  
(530) 623-1354  
FAX: (530) 623-1353

Environmental Health Division  
(530) 623-1459  
FAX: (530) 623-1353

