



FOOD/BEVERAGE VENDOR APPLICATION

Please complete all information

Event: _____

Event Date(s): _____

Event Time(s): _____

Event Location/Address: _____

Vendor Information

Applicant's Name: _____

Applicant's Phone Number: _____

Applicant's Email Address: _____

Company/Business Name: _____

Company/Business Address: _____

Company/Business **EVENT DAY ON-SITE** Contact Name: _____

Company/Business **EVENT DAY ON-SITE** Contact Cell Phone: _____

Description of Operation (Provide service date on all that apply)

Food vendor (NOT in a mobile food unit):

Sale of food/drink items with no cooking Yes Circle if applicable

If yes, no additional information required.

Cooking with an open flame: 2A10BC fire extinguisher (red): _____ Date of last service

Cooking with solid fuel or oil: class "K" fire extinguisher (silver): _____ Date of last service

Mobile Food Unit (FOOD TRUCK/OPERATING WITHIN A TRAILER/CART):

If you have been inspected by another fire department please provide that information:

Department name: _____ Date of Inspection: _____ verification must be provided

License plate of MFU: _____ License #

All units (cooking or not): 2A10BC fire extinguisher (red): _____ Date of last service

Cooking with oil: class "K" fire extinguisher (silver): _____ Date of last service

Cooking with solid fuel: class "K" fire extinguisher (silver): _____ Date of last service

Cooking that produces grease-laden vapors: (Ansul/exhaust w/suppression): _____ Date of last service

Vendor

Provide the completed application to your Event Promotor **fifteen (15) day's prior** to your scheduled event.