

For the fee amount please see the fee schedule at <http://www.fairfieldct.org/health> or speak with a Sanitarian.



Town of Fairfield

HEALTH DEPARTMENT
725 Old Post Road
Fairfield, Connecticut 06824

Receipt #: _____

Approved by: _____

Sands L. Cleary
Director of Health

Phone (203) 256-3020
Fax (203) 254-8850

Temporary Food Service Application

A fee for a Temporary Food License is required if you do not have a current Food Establishment License issued by the Fairfield Health Department. There is no fee for Non-Profit Organizations.

Both sides of this form need to be completed in full.

Temporary Event Information

Name of Event:	Date/Time of Event:
Location of Event:	
Event Operator	Event Contact Phone:

Food Booth Operator & Food Establishment Business Owner Information

Name of Person Operating Temp Food Booth on day of Event:	Contact Phone:
Name of Business/Restaurant/Establishment:	Owner's Name:
Address of Business/Restaurant/Establishment:	Owner's Address:
	Owner's Telephone:
Qualified Food Operator's Name:	QFO Expiration Date:

A copy of your current Food License issued by your municipality, most recent inspection report and a copy of your Qualified Food Operator's Certificate is required for all Restaurants, Food Establishments, Vendors, Caterers and Businesses.

~CONTINUED ON REVERSE SIDE ~

