



County of Bernalillo

State of New Mexico

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TEMPORARY FOOD PERMIT APPLICATION

**FOOD SAFETY TRAINING IS REQUIRED FOR ALL EVENTS
PERMIT WILL BE ISSUED AFTER COMPLETION OF INITIAL INSPECTION**

1. EVENT _____

2. LOCATION OF EVENT (Address) _____

3. DATE(S) OF EVENT _____ TIME OF BOOTH SETUP _____

REQUESTED TIME OF INSPECTION _____

4. NAME OF CONCESSION OR BOOTH _____

5. APPLICANTS NAME _____ PHONE/FAX _____

6. APPLICANTS ADDRESS _____

Name of food facility for offsite preparation _____

Address _____ Phone _____

7. IF **POTENTIALLY HAZARDOUS FOOD IS TRANSPORTED** to the event:

• What is the length of **time in transport**? _____

• How is the food to be kept? **Hot or cold** _____

8. **HAND WASHING FACILITIES:**

• Plumbed sink ____ or gravity flow container ____

• At a minimum, you need 5 gallons in a container with a spigot, to leave hands free for washing, a bucket for wastewater, soap, and single use paper towels

9. **WHERE WILL UTENSILS BE CLEANED & SANITIZED?** _____

10. LIST ALL FOODS TO BE SERVED: Identify how you will keep hot food hot & cold food cold.

| FOOD ITEM | OFF SITE PREP? YES OR NO | COOKING METHOD? <small>(e.g. deep fry, grill, bake)</small> | FOOD TEMPERATURE HOLDING METHOD? |
|----------------------|-------------------------------------|---|---|
| Example: Chile Beans | No | Cooked on stove in booth | Steam table |
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NO HOME FOOD PREPARATION OR STORAGE IS ALLOWED!

I have read/understand and will comply with, the Temporary Food Permit requirements.

Applicant's Signature _____ Date _____

FOOD HANDLERS IN YOUR BOOTH

DATE OF FOOD TRAINING

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