

Return To: City of Concord
Code Administration
Health Services
37 Green St



FEE: \$112.00
Make checks payable to:
CITY OF CONCORD
Application fees are non-refundable
FOR OFFICE USE ONLY
License No.: _____
Date Expires: _____

Application for Temporary Food License

Applicant Information			
Full Name:			Date:
<i>First</i>	<i>Last</i>	<i>M.I.</i>	
Address:			
<i>Street Address</i>			<i>Apartment/Unit #</i>
<i>City</i>		<i>State</i>	<i>ZIP Code</i>
Phone:		Email:	
Name of Event:		Start Time of Event:	AM/PM
Date(s) of Event:	Set-Up Time:	End Time of Event:	AM/PM
Name of Estab.:			

FOOD SAFETY MEASURES			
Will your food require hot holding?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Detail hand-washing facilities:
Will your food require cold holding	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
List hot/cold holding methods:			

FOR CONCORD LICENSE HOLDERS ONLY			
Is your license current?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Exp. Date:
List Foods:			
Grilling or Frying at event?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	List Safety Precautions:
Tent?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	List Size:

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FOR NON-CONCORD LICENSE HOLDERS

Where is your license held?	Exp. Date:
ServeSafe Expiration Date:	Last Inspected:
Hot Held Foods:	
Cold Held Foods:	

ADDITIONAL DETAILS

Non-Temperature Control for Safety Foods:
Source of Food:

Signature

NOTE: Vendors not licensed in the City of Concord must provide a copy of their current food service license, ServeSafe Certification, current Hawker's and Peddler's License, menu, and a copy of their most recent inspection for their application to be processed.

Signature: _____ Date: _____

Signature: _____ Date: _____

Health & Licensing Officer