

**Temporary Food Service
Waiver Form**

I; _____ representing _____ food booth have viewed the video “Food Safety For Fund Raisers,” and understand the materials presented. Our booth agrees to abide by the Temporary Events Guidelines, which were given to me with the temporary food service application form. If our booth fails to meet these guidelines, I understand that our food service booth may be forced to cease operation immediately. By signing below, I acknowledge receipt of the temporary food service guidelines, certify that I am authorized by the organization to act as their agent, and agree the booth will abide by Health Code Regulations.

Booth Representative’s Signature

Date

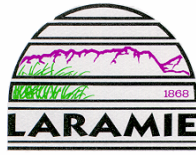
Booth representative is exempt from viewing the video due to the following:

_____ Proof of prior food safety training/food handler’s card

_____ Licensed mobile food vendor

_____ Inspector’s Initials

PO Box C
 Laramie, WY 82073
 Phone: 307-721-5283
 Fax: 307-721-5248



FOR OFFICE USE ONLY	
Amount Paid:	_____
Check:	_____ Cash: _____
Non-Profit ID #:	_____
Received By:	_____

**CITY OF LARAMIE
 ENVIRONMENTAL HEALTH
 TEMPORARY FOOD LICENSE
 APPLICATION**

Cost:
 With Non Profit ID # : \$0.00
 All other applications: \$25.00
 Make checks payable to:
City of Laramie

Application must be submitted 5 business days prior to event with payment or license may not be issued on time

- Event: _____ Location of Event: _____
- Dates of Event: _____ Begin Time: _____ End Time: _____
- Organization Represented: _____ Applicant's Name: _____
- Applicant's Address: _____ City: _____ State: _____ Zip code: _____
- W/Phone: _____ H/Phone: _____ Person(s) in charge at Food Service Site: _____
- Location of Advanced Preparation: _____ Times of Advanced Prep: _____
- Type of Thermometer Available (if applicable): _____
- Water Source: _____ (e.g. Municipal) Wastewater Disposal: Sewer _____ Holding Tank: _____
- Describe: Cold Holding Equipment _____ Cooking Equipment _____
 Hot Holding Equipment _____ Reheating Equipment _____

10. Please list all foods to be served:

FOODS NOT LISTED BELOW WILL NOT BE ALLOWED TO BE SERVED			
FOOD ITEM AND SOURCE (Where are you getting it)	COOKING/PREPARATION PROCEDURES	HOLDING HOT / COLD	SERVING HOT/ COLD

- If food is transported: Provide length of time in transport, and how it is kept hot or cold: _____
- Hand Washing Facilities: Plumbed Sink: _____ Gravity Flow Container: _____
Note: Restrooms do not qualify as a hand washing sink
- Utensil Washing Facilities: Plumbed 3-compartment sink: _____ Adequate Supply of Utensils for Day: _____
- Garbage Disposal: Cans: _____ Dumpsters: _____

I hereby consent to inspection by the City of Laramie Environmental Health and acknowledge that issuance and retention of this license is contingent upon satisfactory compliance with the food safety regulations.

APPLICANT'S SIGNATURE: _____ **DATE:** _____