

# Seasonal Food Service Permit Application

Environmental Health & Sustainability  
 1520 K Avenue, Suite 210, Plano, TX 75074  
 Email: [envhealth@plano.gov](mailto:envhealth@plano.gov)  
 Office: 972-941-7143 Fax: 972-941-7142  
<http://www.plano.gov/201/Environmental-Health>



The operation of a seasonal food establishment is greater than fourteen (14) days but less than forty-five (45) consecutive days per event per vendor. Seasonal permits are limited to three (3) per calendar year, per vendor. Vendors with seasonal permits may not operate at the same location for more than forty-five (45) days during the same calendar year. Floors must be constructed of concrete, asphalt, tight wood or other similar easily cleanable material, and kept in good repair.

A. PERMIT TYPES / FEES		PERMIT FEES ARE NON-REFUNDABLE		
Food Vendor <b>Not Permitted</b> with the City of Plano		\$155.00		
Food Vendor <b>Permitted</b> with the City of Plano		\$20.00		
Not-for-Profit – Verification Required. (Application Processing Fee Only)		\$20.00		
A <b>Late Fee</b> is assessed if your application is submitted less than five (5) working days prior to the event, or 14 working days prior to the event if five (5) or more booths are permitted for the event.		\$50.00		
<b>Applications WILL NOT be accepted after 4:00 p.m. on Thursday immediately preceding event.</b>				
B. APPLICANT INFORMATION				
Business Name:		Contact Person:		
Mailing Address:		(For Office Use Only)  <b><u>Date Received</u></b>          <b><u>Env. Health Approval</u></b>		
City:	State:			Zip:
Out of Town Vendor: <input type="checkbox"/> Yes <input type="checkbox"/> No - If yes, submit copy of health permit and most recent inspection report with application.				
Email:	Phone:			
What time will booth be set up and ready for inspection? _____ <input type="checkbox"/> AM <input type="checkbox"/> PM				
Food Prep Begins _____ <input type="checkbox"/> AM <input type="checkbox"/> PM				
Name of food handler in charge at booth: _____				
Does the person in charge at the booth possess a food handler card or a food manager certification? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you a Not-for-Profit 501(C)(3) Tax Exempt Organization? <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>SUBMIT COPY OF TAX EXEMPT CERTIFICATE IF APPLICABLE</b>				
C. EVENT/ORGANIZER INFORMATION				
Event Name:				
Event Address:				
Event Start Date:		Event End Date:		
Event Start Time:	<input type="checkbox"/> AM <input type="checkbox"/> PM	Event End Time:	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Expected Attendance at Event:		Event Held <input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors		
Name of Event Organizer:		Cell Phone:		
Event Organizer Email Address:				
<b>Fee Amount:</b> _____ <b>Paid:</b> _____ <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Visa <input type="checkbox"/> Master Card Receipt Number: _____ <input type="checkbox"/> Mail <input type="checkbox"/> Pick Up				

**OUTDOOR EVENTS:** The food preparation and serving area must have a fire resistant overhead covering that protects the interior from the weather. If a 200 square foot tent with sides, or a 400 square foot tent without sides is used, then a tent permit must be obtained from Building Inspections Department at 972-941-7140.

**D. FOOD INFORMATION**

Please list specific menu items, including drinks to be served. **Foods prepared at home are not approved and shall not be offered for consumption.**


List on-site cooking equipment:

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List on-site hot and/or cold holding equipment:

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Name and address of food supplier (i.e., grocery store)

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Will food preparation or cooking take place prior to the event?  Yes  No

If yes, provide name and address of restaurant:

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**E. SITE INFORMATION**

3-Compartment Sink for Warewashing?  Yes  No Sanitizer Test Strips?  Yes  No

Toilet and Handwashing Facilities Available?  Yes  No

Name and Contact Information of Person Responsible for Trash and Liquid Waste Disposal:		
<b>F. PERSONNEL / EMPLOYEE INFORMATION</b>		
Person(s) preparing food/drink. List ALL employees/volunteers for ALL shifts (use additional page if needed)		
Person(s) serving food/drink. List ALL employees/volunteers for ALL shifts (use additional page if needed).		
Person(s) cleaning up. List ALL employees/volunteers for ALL shifts (use additional page if needed)		
<b>G. ADDITIONAL CONTACTS</b>		
Special Events Permit (Parks Department) Contact 972-941-7288	Fire Department: Contact 972-941-5261 (for Fire Department requirements)	
Building Inspections: Contact 972-941-5261 (for temporary sale permit and tent permit)		
<b>REQUIRED SIGNATURE:</b> I /WE agree that the issuance of this permit is contingent upon satisfactory compliance with the City of Plano Food Ordinance. Any non-compliance observed during inspection may result in the revocation of my temporary food permit, and I must immediately cease operation.		
Applicant's Signature:	Date:	

**DID YOU REMEMBER TO:**

- COMPLETELY FILL OUT APPLICATION
- SIGN APPLICATION
- ATTACH COPY OF PERMIT AND MOST RECENT INSPECTION REPORT
- ATTACH COPY OF TAX EXEMPT CERTIFICATE IF APPLICABLE