

Wayne County Environmental Health

301 North Herman Street, Box CC

Goldsboro, NC 27530

(919) 731-1174

wchd.fl@waynegov.com

Limited Food Service Application

All applications must be submitted complete (pages 1-2); any partial applications will not be accepted and disapproval forms will be faxed back to the applicants. One application per food operation/concession or unit is required. **All applications & fees must be submitted to our office at least fifteen (15) calendar days prior to the event's start date. Submit \$75 permit fee with application.** Fee can be paid by cash or check made payable to Wayne County Health Department. A confirmation letter will be sent via e-mail or mail when completed application and fee have been received. (Please note that some vendors do not require a permit from our department. Some examples of foods that **would not require a permit** are candy/caramel apples, cotton candy, snow cones, applejacks, popcorn, funnel cakes, etc. Please call our office for clarification before sending application/money.)

Please fill out application completely including:

1. Name, mailing address, email (if applicable) and telephone number of the permit holder of the limited food service establishment;
2. Event dates, and hours of operation;
3. Proposed menu, food handling procedures, including anticipated food volume and sources;
4. Food equipment list;
5. Proposed water supply;
6. Any information necessary to ensure compliance.

Name: _____

Name of Unit/Concession/Food Operation: _____

Mailing Address: _____

Phone Number: (____) - ____ - _____

Email: _____

Contact Number for day of event: (____) - ____ - _____

Date(s) of Event/Date of Valid Permit: _____

Hours of Operation: _____

List all food and beverage items that will be sold below:

Food Item/Beverage	Source	Quantity	Where Prepared	Methods of Preparation
Example: Hamburger	Joe's Supermarket Any City, USA	50 Lbs.	On-site	Cooked from pre- portioned frozen patty on griddle

Wayne County Environmental Health Department reserves the right to deny the request to serve food to the public if conditions are found that could potentially endanger the public health.

Signature: _____

Date: ____/____/____

Title: _____