

## TEMPORARY FOOD MINIMAL FOOD SERVICE APPLICATION

Apply on-line at [www.kingcounty.gov/health/portal](http://www.kingcounty.gov/health/portal)

**COMPLETE ALL ITEMS. TYPE OR PRINT LEGIBLY. DUE AT LEAST 14 DAYS PRIOR TO EVENT.**

1. Before the event, are all of the potentially hazardous foods packaged in a facility under permit?  Yes  No
2. At the event, are all foods packaged, including packaged samples?  Yes  No

**\*If question 1 or 2 above is answered NO, complete the Moderate or Complex permit application.**

→ Select the permit you would like to purchase below (include late fees, if applicable):

1. Permit type	Fee	Office code
<input type="checkbox"/> Minimal Food Handling - Single Temporary Permit	\$120	6240
<input type="checkbox"/> Minimal Food Handling - Unlimited Temporary Permit (valid for a single calendar year)	\$236	6241
<input type="checkbox"/> Late fee, application made 3-5 days prior to event	\$50	S620
<input type="checkbox"/> Late fee, application made 1-2 days prior to event; submit in person; requires approval	\$100	S620
<b>→ Total:</b>		

**1. FIRST Event or Market Name\*:** \_\_\_\_\_ Event Coordinator: \_\_\_\_\_

Event Coordinator Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Event Location: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Event Start Date: \_\_\_\_\_ Event End Date: \_\_\_\_\_ Start Hour: \_\_\_\_\_ End Hour: \_\_\_\_\_

*\*For the minimal unlimited permit, include the name of first market or event you will be attending*

**2. Name of Booth:** \_\_\_\_\_ Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

Permit Start Date: \_\_\_\_\_ Permit End Date: \_\_\_\_\_ *\*Unlimited permit end date: 12/31/2018*

**3. Menu:**

List all potentially hazardous foods	Agency that permits the packaging of the food?	Cold holding equipment used at event? (41°F or below)	Hot holding equipment used at event? (135°F or above)
<i>Example: Cheese</i>	<i>WSDA</i>	<i>Ice Chest</i>	

Completing this application does not constitute approval to operate. An inspector will contact you prior to issuing a permit.  
**There is a \$25 refund processing fee for approved refunds, and a \$35 fee for returned checks.**

**Please submit your application to:**

**EASTGATE**  
 14350 S.E. Eastgate Way, Bellevue, WA 98007  
 (206) 477-8050

**DOWNTOWN SEATTLE**  
 401 - 5<sup>th</sup> Avenue, Suite 1100, Seattle, WA 98104  
 (206) 263-9566

For Office Use Only: Event ID: _____ Event Start Date: _____ Booth ID #: _____ AR #: _____ Invoice #: _____ Payment Date: _____ District Code: _____
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Available in alternative format upon request