

Application for Food Permit to Operate as a Caterer

Accurate information is required. Incomplete application packets will not be accepted.

Date: _____

Business Name (DBA): _____

Business Address: _____

Caterer's Name: _____

Caterer's Address: _____

Business Phone: _____ Caterer's Phone: _____

Email: _____

Name and Address of Commissary: _____

Date of expiration for the Managers Food Safety Certificate: _____

PRIOR TO APPROVAL THE FOLLOWING SIX (6) DOCUMENTS MUST BE SUBMITTED:

Submitted

- I have enclosed a copy of the County Environmental Health Permit.
- I have enclosed a copy of the caterer's Food Managers Safety Certificate.
- I have enclosed a copy of the menu or sample menu.
- I have enclosed a copy of the caterer's Commissary Operating Permit.
- I have enclosed a copy of the Commissary Kitchen Verification form.
- I have enclosed a copy of operating SOP's for this catering business.

Signature of owner/caterer: _____