



Environmental Health Services	Неа
Intermittent 30 Day/Seasonal 90	Day
Temporary Event License Applica	tion

<u>A 100% late processing fee</u> will be added to each temporary license fee, operational plan review, if required, that is not received in the Environmental Health Office by noon two business days before the event begins. [MCC § 21.612]

Facility #	#:
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before the event begins. [MCC § 21.612]		Audit/License #:		
INCOMPLETE APPLICATIONS/OPE	ATIONAL PLAN REVIEWS V	VILL NOT BE PROCESSED		
Restaurant/Organization:		Phone #:		
Licensee (owner or organization):				
Address of Licensee:		Email:		
Event:	Date(s) o	f Event:		
* Note: (Intermittent Temporary Res location in connection with r		food operation is at a specific out back page of this application)		
Location (street name/number):		Hours:		
Event Coordinator:	Phone:	Email:		
Booth: Set-up time on first day of ever	nt:	Start time:		
Person in charge of booth:		On-Site phone:		
Food Preparation: <u>Home-prepared f</u> approved by the Health Departme				
Handwashing: Describe:				
b. Water container and catch basin nc. Temporary hand wash station mud. Provide warm water.	nust be 5 gallon capacity. st be set up before food prepa			
Disposal of Waste Water: (i e water use	d for handwashing washing dis	shware bleach solution cold/hot-holding		

Disposal of Waste Water: (i.e water used for handwashing, washing dishware, bleach solution, cold/hot-holding) Describe:

(Waste water <u>must not</u> be disposed of on ground or in storm drain).

Submission of Application:

All portions of the application must be completed

Refer to Fee Schedule or www.mchealthinspect.org	Make check payable to:			
or call office @ (503) 988-3400	Multnomah County Environmental			
If your event operates more than 30 days and you have an interruption in food	Health Services			
service or your license expires, a written notification is required from the Event	847 NE 19th Avenue, Suite 350			
Coordinator stating your last date of operation; or notification to the EHS office	Portland, OR 97232			
prior to interruption to avoid late fees.	(Or pay by phone)			
Benevolent Administrative Processing Fee (Once Each Calendar Year) Benevolent temporary restaurants are charged a fee for the application process. This is not a license fee. A permission letter must be submitted with applica- tion if Benevolent Organization allows another operator to use its Non-profit Tax ID number. The Benevolent Organizations are the responsible party for that event therefore approval for use of their Non-profit tax number must be verified. All proceeds must go to the Benevolent Organization.				

Non-profit tax ID #: ____

(A photocopy of 501C3 is required)

847 NE 19th Ave Suite 350 • Portland, OR 97232 • mchealthinspect.org • Phone: 503.988.3400 • Fax: 503.988.5844

Environmental Health Services

Inspection(s) of your temporary restaurant may occur at any time from the point of setting up to the point of closing down your food service operation. All temporary restaurant licenses are issued for each intermittent 30-day or seasonal 90-day for the location, operator, and dates posted on each license.

Signature of Applicant: _____ Date: _____ Date: _____

Intermittent (30 Day) Temporary Restaurant Applicants

Make copies of this page for additional events that will occur at this location under your intermittent temporary restaurant license.

Oversight Organization of the Events(s)

Oversight Organization's Name: Name of Event: ______ Coordinator: _____ Phone:_____ Coordinator's email: Cell:_____ _____ Services Provided by the Oversight Organization (e.g. garbage collection, portable toilets, hand washing, facilities, ice, gray water collection/disposal site, etc.)

Dates of Food Service (start date and end date): _____

Time Booth will be set up on first day of event: ______

Days & Times of Food Service (Booth) Operation

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start Time							
End Time							

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