



District Headquarters - 700 Columbine St., Sterling, CO 80751
(970) 522-3741 - 877-795-0646 - www.nchd.org

NON-PROFIT VENDOR APPLICATION FOR TEMPORARY FOOD EVENTS

All non-profit vendors must complete and submit this application to the Event Coordinator (if applicable) or to NCHD for each event that is two (2) days or longer in duration conducted in NCHD's jurisdiction. If no menu and no equipment change are occurring from one event to another, the completed original may be copied for all events.

Event Name: _____ Date(s): _____

Please complete the following information:

Temporary Retail Food Establishment Name			Legal Owner's Name		
Establishment Address(Street Address and P.O. Box)					
City		State		Zip Code	
Telephone Number ()			Fax # ()		
Contact Name			Contact #		
			E-mail		

****Please attach a copy of your organization's non-profit status certificate to the back of this application.**

Hours of operation of the temporary food booth for this event:

Mon _____ Tue _____ Wed _____ Thu _____

Fri _____ Sat _____ Sun _____

How many people do you anticipate serving each day of the event? _____

Please list any additional events and dates that you plan on participating in (County Name) County

Event name _____	Date _____	Location _____
_____	_____	_____
_____	_____	_____

FOR HEALTH DEPARTMENT USE

Received by EH Specialist: _____ Date _____

Copy of non-profit status certificate attached: _____

MENU *(Please attach additional sheet, if necessary)*

Please list all food products and the specific source of all food items (name of grocery chain, wholesaler, etc.)
Be sure to include items such as toppings and condiments.

Food and Drink Items	Location where obtained
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	