



Bismarck-Burleigh Public Health

500 E Front Avenue, Bismarck, ND 58504

701-355-3400 • Fax: 701-221-6883 • Email: bbph@bismarcknd.gov

FOR OFFICE USE ONLY:

Date Recvd: _____

Recvd by: _____

Assigned EHS: _____

TEMPORARY FOOD LICENSE APPLICATION

This application must be submitted at least one week prior to the first day of the event unless other arrangements are made. Submit completed application with \$75.00/unit fee to: Bismarck-Burleigh Public Health (contact info at top of application). Checks are to be made payable to Bismarck-Burleigh Public Health. Incomplete applications will not be processed. Licenses will be issued upon application review and approval by Environmental Health staff.

_____ Number of units/booths/stands X \$75.00 = _____ Fee Total

Business Name: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Applicant's Name & Title: _____ Applicant's Phone #: _____

Applicant's Email: _____

List ALL events (dates & locations) that you will operate at: _____

List all of your food suppliers (e.g.: grocery store, wholesaler, restaurant, etc.): _____

Food Preparation Site (All food must be prepared at a licensed kitchen or on-site at event):

- Off-site On-site Both off-site and on-site

Off-site prep kitchen name/address _____

Type of structure that will be used for food service (i.e.: permanent building, tent/booth, a mobile unit, etc.): _____

List all equipment (i.e.: cooking, hot holding and cold holding) that will be used onsite: _____

Food Transport Method:

- Ice Chest Refrigerated Truck Cambro Other _____

Describe where & how will liquid waste be disposed of: _____
