

Morrison County Health & Human Services

213 1st Avenue SE, Little Falls MN 56345
800-269-1464 or (320) 632-7800, www.co.morrison.mn.us
phenvhealth@co.morrison.mn.us

Application for a Special Event Food License

For internal office use only:

Amount \$ _____ Check # _____ Cash _____

Received by: _____

Reviewed by: _____ Yes _____ No _____

License Category and Fee Schedule:

Applications must be received by this office no later than 14 days prior to the event. A late fee will be added to all applications not received 14 days prior to the event, as well as licenses issued on site.

Select each applicable fee:

\$45 Special Event Multi-Day Food License Fee: (2-10 days, calendar year)

+ _____ (\$25, late fee if application not received 14 days prior to the event)

_____ Total

\$25 Special Event Single Day Food License Fee: (one day event)

+ _____ (\$10, late fee if application not received 14 days prior to the event)

_____ Total

A Special Event Food License is a food and beverage service which is used in conjunction with celebrations and special events, and which operates for no more than ten (10) days annually. MN Statutes 2014, Section 157.15, Subdivision 14.

A One (1) day Special Event Food License is a food and beverage service which is used in conjunction with customer appreciation or one (1) day special event

Applicant Information:

Business or Group Stand Name: _____

Applicant Name: _____

Mailing address: _____
(Street/PO Box, City, State Zip)

Telephone: _____ Email address: _____

***Mechanical refrigeration is required for storing potentially hazardous foods held for four (4) hours or longer.**

This application is approved only for operation as specified above. Additional approval is required for any changes.

Notice: The issuance of a dishonored check to this department will require a service charge of \$30 per check. (MN Statute 604.113).

I have received and read the Morrison County Health & Human Services Special Event Food Stand guidelines. I do hereby certify that I will comply with all requirements, and that the information provided on this application is accurate and complete.

Applicant's signature: _____ Date: _____

Applicant's printed name: _____

Event Information:

For each additional event, copy and complete pages 3 and 4, and email to phenvhealth@co.morrison.mn.us .

Name of event: _____

Event location: _____
(Street address, City)

Location where food is prepared: _____
(On site, or name and address of permanent facility with an approved kitchen)

Person in charge of food preparation: _____

Date(s) of event: _____

Time(s) of stand operation (Duration of time food stand will be staffed):

Start am/pm _____ End am/pm _____

Time(s) of food service (Duration of time food will be served to the public),

Start am/pm _____ End am/pm _____

Complete the following information. Select one option from each category:

1. Handwashing Facilities:

Handwashing facilities are required within the food service site. Select one of the following methods:

- Permanent handwashing sink
- Temporary handwashing station*
- Portable handwashing station (per enclosed guidelines) *

2. Dishwashing Facilities:

Dishwashing facilities are required within the food service site. Select one of the following methods:

- Permanent three-compartment sink
- Temporary dishwashing station (per enclosed guidelines) *

**If permanent handwashing and dishwashing facilities are not provided within the food service site, the menu shall be restricted to the following items:*

- i. beverages served in their original container, or bulk beverages served from a dispenser;
- ii. pre-packaged non-potentially hazardous foods;
- iii. pre-packaged potentially hazardous foods** cooked or prepared to order, or pre-cut/pre-washed foods that have been obtained from a licensed food establishment.

***Potentially hazardous foods (PHFs) include:*

- i. raw or heat-treated foods from an animal origin (i.e. eggs, milk, meat, poultry);
- ii. heat-treated foods from a plant origin (i.e. cooked rice, cooked potatoes, cooked noodles);
- iii. raw seed sprouts;
- iv. cut melons (watermelon, cantaloupe, honeydew);
- v. garlic and oil mixtures.

3. Water Source:

- Municipal (city water)
- Private well

4. Liquid/Solid Waste Disposal:

- Municipal
- Private septic system
- Self-contained, mobile unit

Menu:

The Regulatory Authority may restrict the type of food served or the method of food preparation based on equipment limitations, the unavailability of a permanent establishment for utensil and ware washing, adverse climatic conditions, or any other condition that poses a hazard to public health.

(MN Rules 4626.1855, Subpart R).

List all menu items that will be served, the approved source where menu items will be purchased from (grocery store, deli, commercial distributor, etc.), the food storage method used to keep cold foods at or below 41°F (mechanical refrigeration* or freezer, dry ice, cooler, etc.), all food preparation equipment (gas grill, oven range, etc.), and all food holding equipment used to keep hot foods at or above 140°F.

<u>Menu item</u>	<u>Source</u>	<u>Storage*</u>	<u>Preparation equipment</u>	<u>Holding equipment</u>
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				