



**FLORIDA DEPARTMENT OF HEALTH – BREVARD COUNTY**  
**Environmental Health Services**  
**2725 Judge Fran Jamieson Way, Suite A116**  
**Viera, Florida 32940-6605**  
**PHONE: 321/633-2100 FAX: 321/633-2163**  
**www.BrevardEH.com**

For Office Use Only Payment Information
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**TEMPORARY FOOD SERVICE EVENT  
 VENDOR/BOOTH NOTIFICATION FORM**

NOTE: Temporary food service event sponsors or vendors shall notify the local county health department no less than three days prior to a scheduled event under the jurisdiction of the Florida Department of Health (DOH). A food vendor/booth without an existing DOH Sanitation Certificate must submit a fee of \$50.00 if operating under any one of the following conditions: 1) Serving non-potentially hazardous food (Non-PHF) for 4 or more days; 2) Serving potentially hazardous food (PHF) for 4 or more days and currently licensed by another state agency (in Florida) for food service operation; 3) Serving PHF for any number of days and not currently licensed by another state agency (in Florida) for food service operation. No booth fees are required for booths operated exclusively by sponsor personnel or for vendors/booths with an existing DOH Sanitation Certificate. Checks should be payable to Brevard County Health Department. Payment with Visa and MasterCard are accepted via telephone at (321) 633-2100, option 4.

VENDOR/BOOTH INFORMATION	
Name of Event	Name of Booth
Person in Charge of Booth	Telephone Number of Person in Charge of Booth
Anticipated Date/Time of Setup	Hours of Operation
State Food Service Permitting/Licensing Agency (in Florida) <input type="checkbox"/> Department of Agriculture and Consumer Services <input type="checkbox"/> Department of Business & Professional Regulation <input type="checkbox"/> Department of Health <input type="checkbox"/> None/Out of State <input type="checkbox"/> Other _____	
State Food Service Permit/License Number (in Florida)	State Food Service Permit/License Expiration Date (in Florida)

**Chapter 64E-11, Florida Administrative Code requires all food to come from approved sources.  
 No food storage, preparation, or utensil cleaning shall occur in private homes.**

FOOD SERVICE INFORMATION
Please answer each question. If not applicable, indicate a reason.
Type of food being served (menu may be attached)
Location of advanced food preparation
Method of transporting food to the event
Method of keeping food hot and/or cold at the event
Method of preparing and cooking food at the event
Describe the methods used to protect food from dust, insects, coughs, and sneezes
Method of providing adequate hand washing
Each booth must have adequate hand washing facilities and supplies to operate. At a minimum each booth must have a container with potable water equipped with an on/off spigot, liquid hand soap, paper towels and a catch basin for wastewater. Check with event sponsor for any provided facilities.
Failure to comply with applicable food service requirements in accordance with Chapter 64E-11, Florida Administrative Code may result in enforcement action. <span style="float: right;"><input type="checkbox"/> I understand and agree</span>

I certify that to the best of my knowledge and belief all of the information/statements contained herein and on any attachments are true, correct, complete, and made in good faith. I understand that these regulations include food intended for service to the public regardless of whether there is a charge for the food. I agree to assume responsibility for this event booth and certify that said business will be conducted in compliance with Chapter 64E-11, Florida Administrative Code and Section 381.0072, Florida Statutes.

\_\_\_\_\_  
 Name of Vendor/Booth Representative (print or type)

\_\_\_\_\_  
 Signature of Vendor/Booth Representative

\_\_\_\_\_  
 Date