

**Shasta County Department of Resource Management
Environmental Health Division**

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www.ehd.shasta.ca.us

**TEMPORARY BOOTH NOTIFICATION FOR
PRE-PACKAGED, NON-POTENTIALLY HAZARDOUS FOOD**

Name of Concession _____

Name of Function _____ Date(s) _____

Location of Function _____ Time(s) _____

Concession Owner _____ Phone _____

Mailing Address _____

FOODS TO BE SERVED

All food, including samples, shall be prepackaged. Food may not be portioned and packaged at booths.

SOURCE OF THE FOOD

Include cottage food information, name of store where food is purchased, or copy of license from the California Food and Drug Branch.

As the proprietor _____, manager _____, owner _____ of this establishment, I certify that should a permit be granted, I shall observe the statutes and regulations pertaining to the operation of this establishment as may be promulgated. I also agree that the representatives of the Environmental Health Division may make inspections and examine records during the hours when the business is open to the public. By signing this application, I agree to defend, indemnify, and hold the county harmless from any claim, action, or proceeding brought to attack, set aside, void or annul the county's approval of this application.

Signature

Date

Booths found to be handling unpackaged food, potentially hazardous food, or food that is not from an approved source will be required to close until they complete the appropriate permit application, pay fees, and pass inspection.

Date Received _____ By _____

Notification application review completed and Permit granted by _____ Date _____