



**Recurring Temporary Food Establishment  
Permit Application**  
**1038 West Ivy St, Moses Lake, WA 98837**  
**Phone: (509) 766-7960 • www.granthealth.org**

Complete this application and submit it, along with the appropriate fee, to Grant County Health District at **least five business days before the next event.**

Failure to complete this application in full may result in restrictions or possible closure.  
 See the GCHD website for current fees, <https://granthealth.org/317/Fee-Schedule>.

Please mark the permit you are applying for:	<b>LOW RISK FOODS</b>	<b>MODERATE RISK FOODS</b>	<b>HIGH RISK FOODS</b>
<b>Commercial Food Vendor (for-profit)</b>			
<b>Non-commercial Food Vendor (non-profit)</b>			
<b>Applicant has an Annual Food Permit from GCHD</b>			

**Applicant info:**

Name of Food Establishment (Booth Name):	
Person in Charge of Food Service (Owner):	
Phone:	Email:
Mailing Address:	

**Event Info:**

Event Name:	Location (address):
Name of Coordinator:	Phone:

**Application must be submitted with all the following items:**

<input checked="" type="checkbox"/>	ITEM #	ITEM	DESCRIPTION
	1	Event Coordinator	<b>Provide copy of the Event Coordinator's approval if not already on file.</b>
	2	Fixed Menu	<b>Provide a menu or detailed list of all the food and drinks you will be serving.</b> Note sources of food purchases.
	3	Food Preparation Methods	<b>Describe preparation methods of all food and drinks you will be serving.</b> Include all steps: cold holding, thawing, prepping, assembling, cooking, hot holding, etc. You may use Attachment A to specify your methods or use your own format as long as all the required information is included.
	4	Fixed Booth Floor Plan	<b>Provide a scaled floor plan drawing</b> showing the layout of the booth. Label the type and location of all equipment (Handwash station, refrigeration, protective barriers etc.). Show work areas, ware washing, and preparation tables.
	5	Food Worker Cards	<b>All food workers</b> must have a current Washington State Food Worker Card. Submit copies with the application and have them available in the booth.

	6	Copies of Prior Inspection(s)	<b>Provide copies of prior inspections.</b> To qualify, the food booth must have consecutive prior inspection(s) without red critical violations for the current year. One inspection for low risk, two for moderate risk, and three for high risk.
	7	Commissary (offsite kitchen)	<b>Submit Commissary Application if any food is handled/prepared offsite prior to the event.</b> This includes any exposed food handling (washing, cutting, marinating, cooking, etc.). A commissary agreement letter is required if you are not the legal owners of the commissary.

By signing, I understand that:

1. My application cannot be processed until all the required information is submitted.
2. Changes in menu or floor plan may require a new application.
3. Permits are non-transferable and only valid for the current owner and event listed on this application.
4. That issuance and retention of this permit is contingent upon satisfactory compliance with GCHD requirements.

**SIGNATURE** \_\_\_\_\_ **TITLE** \_\_\_\_\_ **DATE** \_\_\_\_\_

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**FOR GCHD USE ONLY**

Date	Amt	PHA	Paid by
Payment Type	Card	Cash	Check Receipt #