



Genesee and Orleans County Health Departments

Application for a Permit to Operate Temporary Food Service



Before a permit can be issued, you must prove compliance with NYS Worker's Compensation AND Disability and Paid Family Leave Benefits Insurance requirements.

Please visit the NYS Department of Health Website for more information:

<https://www.health.ny.gov/publications/6585/>

Name of Business/Operation: _____

Business Address: _____

Person in Charge: _____

Mailing Address (if different from above): _____

Phone #: _____ Email: _____

Event Type

Single Event \$50.00: 1-14 consecutive days at the same location

Multiple Event \$125.00: More than 14 days in duration **or** non-consecutive days at the same location (permit expires 12/31)

Name of Event	Event Location	Time(s)	Date(s)

Menu Item(s)	Purchased From	Prep Location(s)	HOME-PREPARED FOODS ARE NOT ALLOWED

FOOD HANDLER CERTIFICATE(S) ARE REQUIRED FOR ORLEANS COUNTY AND MUST BE SUBMITTED WITH THIS APPLICATION. CERTIFICATE MUST BE AVAILABLE AT THE EVENT LOCATION.

A \$50 late fee is charged to all applications received by this office less than 7 days prior to the event start date. Permits for events more than 14 days always expire on December 31st of the year they are issued.

The undersigned applicant has received, read, understands, and agrees to operate the Temporary Food Service Establishment in compliance with Subpart 14-2 of the New York State Sanitary Code.

Signature of Operator _____
Date

**Genesee County Event - Mail form to: 3837 West Main Street, County Building II Batavia, NY 14020
or Email to: Health@GeneseeNY.gov**

**Orleans County Event - Mail form to: 14016 Route 31 West, Suite 101 Albion, NY 14411
or Email to: OCPublicHealth@OrleansCountyNY.Gov**

PERMIT APPROVED: <input type="checkbox"/> YES <input type="checkbox"/> NO	*OFFICE USE ONLY*
PERMIT Expiration Date: _____	BY: _____ Date: _____