Town of Flower Mound Environmental Services
Mailing Address: 2121 Cross Timbers Road, Flower Mound, TX 75028
Physical Address: 1001 Cross Timbers Road, Suite 2330, Flower Mound, TX 75028
Telephone: 972-874-6340 Fax: 972-874-6473 Website: www.flower-mound.com

TEMPORARY FOOD ESTABLISHMENT PERMIT APPLICATION

A COMPLETED APPLICATION MUST BE RECEIVED A MINIMUM OF 3 FULL BUSINESS DAYS PRIOR TO EVENT

$40.00 FEE PER EVENT (Maximum - 14 Consecutive Days) PERMIT FEES ARE NON-REFUNDABLE

TAX EXEMPTION PAPERWORK MUST BE ATTACHED TO APPLICATION FOR FEE WAIVER

PLEASE PRINT LEGIBLY OR TYPE APPLICATION INFORMATION

EVENT INFORMATION

NAME OF EVENT or BUSINESS: _____

ADDRESS OF EVENT: _____
Street City State Zip

DATE(S) OF EVENT: _____

TIME(S) OF EVENT: _____a.m./p.m. TO _____ a.m./p.m.

APPLICANT INFORMATION

NAME OF FOOD BOOTH or FUNCTION: _____

OWNER/CONTACT PERSON: _____

ADDRESS: _____
Street City State Zip

PHONE: _____ FAX: _____ E-MAIL: _____

PERSON IN CHARGE ON SITE: _____ PHONE: _____

ALL FOODS MUST BE PREPARED ON SITE OR AT A PERMITTED FACILITY

FOOD ITEMS TO BE SERVED*	***PLACE OF PREPARATION AND STORAGE***

** Note: Only authorized food and beverages listed above may be served.*

I understand any permit granted from this application may be revoked for cause. Failure to comply with the Town of Flower Mound rules and regulations, as well as any notices for correction of violations affecting public health and sanitation, and/or any false or misleading information provided on this application, shall be deemed cause for revocation of the Temporary Food Establishment Permit and **CLOSURE** of the establishment.

_____	_____	_____	_____
Print Name of Applicant	Signature of Applicant	Position	Date

Below this line is for Environmental Services office use only *(Rev 10/10)*

PERMIT NO. _____ FEE PAID _____

_____ _____
APPROVED BY DATE OF APPROVAL