

Please mail application and fee to: City of Rockwall Neighborhood Improvement Services 385 S. Goliad Rockwall, TX 75087

## City of Rockwall Special Event Food Service Permit Application \$50.00 FEE

Special Event Name/Date/Times of O	peration:
Where will event be held? (Address):	
Name of Establishment/Organization	:
Name of Owner/Contact Person:	
Phone #:	Email:
Owner's/Organization's address:Str	eet City State Zip
Is Establishment a Trailer or Booth?_	Manufacturer? yesno (provide license if yes)
Types of Foods to be served:	
Will cooking be conducted on site?	Electricity required?
Please list cooking/hot holding/cold h	olding methods/equipment to be brought to site:
Type of sanitizer to be used:	(Test strips must be provided)
Type of ware washing/handwashing of	rapabilities: (Ex. triple sinks/hand sink/buckets only etc.)
Method of liquid waste disposal? (Ex	x. Self contained trailer tank or City sanitary sewer)
(No du	mping in unapproved areas. Dump Station will be designated prior to event)
is issued, all provisions of the City Or	opplication and know the same is true and correct and hereby agree that if a permit dinances and State Laws will be complied with whether herein specified or not. I lent or authorized employee. Permission is hereby granted to enter premises and
Applicant's Signature:	Today's Date:
	*OFFICE USE ONLY*
Date Issued:	Approved By:
Permit #·	Expiration Date: