

Estab # _____

License Year: _____

Category: TEMPORARY EVENT PERMIT

RESTAURANT RETAIL

FOR OFFICE USE ONLY

CHECK REC.: _____ CHECK # _____

AMT: \$ _____ ACCT. # 320-00-43575

EFFECTIVE DATE: _____

FOR OFFICE USE ONLY

**ENVIRONMENTAL HEALTH CONSORTIUM
 CUDAHY, SOUTH MILWAUKEE & ST. FRANCIS
 2424 15TH AVENUE
 SOUTH MILWAUKEE, WI 53172
 (414) 768-8055
 FAX: (414) 768-5720**

TEMPORARY EVENT PERMIT APPLICATION

(TEMPORARY FOOD VENDORS *NOT* LICENSED BY THE STATE ARE SUBJECT TO A TEMPORARY EVENT PERMIT)

ESTABLISHMENT NAME: _____

EVENT ADDRESS #1: _____ DATE: _____

EVENT ADDRESS #2: _____ DATE: _____

BILLING ADDRESS: _____ CITY: _____

ESTABLISHMENT TELEPHONE: () _____ ALTERNATE TELEPHONE: () _____

LEGAL LICENSEE: _____ CORPORATION INDIVIDUAL LLC PARTNERSHIP
LEGAL LICENSEE CAN BE INDIVIDUAL, PARTNERSHIP, LLC OR CORPORATION. IF LICENSED AS CORPORATION, IT MUST BE REGISTERED WITH THE STATE OF WISCONSIN DEPARTMENT OF FINANCIAL INSTITUTIONS.

AGENT FOR THE CORPORATION (IF APPLICABLE): _____

ADDRESS: _____ CITY: _____

EMAIL: _____ CERTIFIED FOOD MANAGER YES NO

CHECKS OR MONEY ORDERS MAKE OUT TO: CITY OF SOUTH MILWAUKEE

PLEASE CHECK THE APPROPRIATE CATEGORIES

TEMPORARY RESTAURANT FEE IS:.....\$ 66
TEMPORARY RETAIL FEE IS:.....\$ 46

TEMPORARY EVENT CATEGORIES

<input type="checkbox"/> Caramel Apples	<input type="checkbox"/> Churros	<input type="checkbox"/> Corn Dogs	<input type="checkbox"/> Cotton Candy
<input type="checkbox"/> Slushies	<input type="checkbox"/> Deep Fried Foods	<input type="checkbox"/> French Fries	<input type="checkbox"/> Ice Cream
<input type="checkbox"/> Lemonade	<input type="checkbox"/> Smoothies	<input type="checkbox"/> Nachos & Cheese	<input type="checkbox"/> Popcorn
<input type="checkbox"/> Pretzels	<input type="checkbox"/> Tacos/Tamales	<input type="checkbox"/> Soda	<input type="checkbox"/> Chicken
<input type="checkbox"/> Snow Cones	<input type="checkbox"/> Pizza	<input type="checkbox"/> Chips	<input type="checkbox"/> Spring/Egg Rolls
<input type="checkbox"/> Hot Dogs, Brats, Hamburgers	<input type="checkbox"/> Baked Goods	<input type="checkbox"/> Sandwiches	<input type="checkbox"/> Fruits/Vegetables
<input type="checkbox"/> Other (specify) _____			

 SIGNATURE OF LICENSEE OR AGENT

 TODAY'S DATE