MONTGOMERY COUNTY HEALTH DEPARTMENT

117 CIVIC CENTER
MT. STERLING, KENTUCKY 40353
(859) 498-3808, EXT. 290
FAX: (859) 498-9082

TEMPORARY FOOD SERVICE REGISTRATION

NAME OF CONCESSION _____

OWNER/SPONSORING ORGANIZATION _____

CONTACT PERSON _____ DAYTIME PHONE _____

LOCATION OF BOOTH _____

CONSTRUCTION OF BOOTH (Trailer, tent, etc.) _____

FOOD LIST

FOOD TYPE	WHERE PURCHASED	METHOD OF STORAGE	TYPE OF EQUIPMENT TO KEEP HOT FOODS AT 140 DEGREES

FOOD MUST BE PREPARED ON SITE OR AT A PERMITTED FOOD SERVICE LOCATION.

Signature _____ **Date** _____