

University of Houston - Sugar Land
 Department of Public Safety - Fire Marshal's Office
 14004 University Blvd., Room 178 – Brazos Hall
 Sugar Land, Texas 77479
 Phone 832-842-2921

Submit completed permit for processing to slkatyfoodpermit@uh.edu

TEMPORARY FOOD DEALER'S PERMIT/REQUEST FORM

Organization and/or Department Name:			
Event Organizer or Contact Person:			
Contact Phone Number:			
Location Where Event Will be Held:			
Site Reservation Confirmed?			
Date of Event:		Start Time:	End Time:
List of Specific Items to be Served:	<i>Note: If serving boxed/prepackaged meals, please state what those meals will consist of for approval.</i>		
Where & By Whom Will Food be Prepared?			
Caterer's Address (if applicable):			
Required documents from caterer:	<input type="checkbox"/> Food manager's certificate <input type="checkbox"/> Food establishment permit (food dealer's permit) <i>Note: Both documents must be submitted for approval.</i>		
Where & How Will Food Be Stored?			
How Will All the Trash be Disposed?			
What is the Purpose of the Event? (check one)	<input type="checkbox"/> Fundraiser/Bake Sale <input type="checkbox"/> Meeting/Informational Session <input type="checkbox"/> Lecture/Workshop/Seminar <input type="checkbox"/> Social Event <input type="checkbox"/> Concerts/Shows <input type="checkbox"/> Other: _____		
Event Type:	<input type="checkbox"/> Internal <input type="checkbox"/> External		
Will you use any of the following?	<input type="checkbox"/> Sterno <input type="checkbox"/> Open Grill – specify type: _____ <input type="checkbox"/> Other: _____ <i>Note: If any have been selected, please submit an Open Flame Permit.</i>		

- 1) **I HAVE READ, UNDERSTAND AND AGREE TO ABIDE BY THE PROCEDURE AND GUIDELINES WHICH ADDRESS THE USAGE OF THE TEMPORARY FOOD DEALER'S PERMIT.**
- 2) **IF THERE ARE ANY CHANGES TO THE TEMPORARY FOOD DEALERS PERMIT BEFORE THIS EVENT, I WILL SUBMIT A NEW PERMIT FOR APPROVAL.**

Initial that you will have the following equipment (if applicable): Thermometer _____ Hand Sanitizer _____
 Protective Wear (Gloves, Hair Restraints, etc.) _____ Water Container / Sanitizing Container / Soap & Water (*required when cooking on site*) _____

Signature: _____ Date: _____

ISSUED BY UH DEPARTMENT OF PUBLIC SAFETY FIRE MARSHAL'S OFFICE:

Signature: _____ Date: _____