



# BETHEL HEALTH DEPARTMENT

Clifford J. Hurgin Municipal Center, 1 School Street,  
Bethel, Connecticut 06801  
(203) 794-8539

---

---

## APPLICATION FOR FOOD VENDOR LICENSE

Name of Business: \_\_\_\_\_

Business Phone: \_\_\_\_\_ 24 Hr. Emergency Phone &/or Beeper: \_\_\_\_\_

Truck

Trailer

Push Cart

Is equipment  self owned  leased

If leased (person leased from): \_\_\_\_\_

Dates of Operation: \_\_\_\_\_

Location of Sales: \_\_\_\_\_

Owner/Operator: \_\_\_\_\_

Do you have a qualified food operator's license? If yes, attach copy.

1. List all items on the proposed menu plus condiments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **PROCEDURES TO KEEP FOOD ON MENU AT PROPER TEMPERATURES**

2. a. Where will food be stored and/or prepared prior to selling?

Name of establishment: \_\_\_\_\_

Address: \_\_\_\_\_

When will it be delivered? \_\_\_\_\_

How will be delivered \_\_\_\_\_

b. What preparation/cooking is required to serve food during operation hours? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. How will cold food be kept cold? (below 45°F) – (i.e. meats, poultry, seafood & dairy products)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. How will hot food be kept hot? (above 140°F) – (i.e. cooked, ready to serve meat, poultry, seafood, rice, vegetables, etc.)

---

---

---

5. Describe hand washing procedures at the unit: \_\_\_\_\_

---

---

---

6. How will utensils, cutting boards, etc. be cleaned and sanitized? \_\_\_\_\_

---

---

---

7. Location of employee toilet facility: \_\_\_\_\_

---

---

---

8. Describe arrangements in the event of a power failure: \_\_\_\_\_

---

---

---

9. General Comments: \_\_\_\_\_

---

---

---

**PLEASE DRAW A LAYOUT OF THE TRUCK, TRAILER OR PUSHCART**

Application reviewed by: \_\_\_\_\_

Comments: \_\_\_\_\_

---

---

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

License Fee: \_\_\_\_\_ Fee Paid: \_\_\_\_\_

License Number: \_\_\_\_\_ License Year: \_\_\_\_\_