



FOOD VENDOR APPLICATION FOR

TEMPLETON CSD – 2017 SUMMER CONCERTS

DATE: _____

BUSINESS NAME: _____

CONTACT NAME: _____

MAILING ADDRESS: _____

EMAIL ADDRESS: _____

WORK PHONE: _____ CELL PHONE: _____

TYPE(S) OF FOOD BEING SERVED: _____

1) Please attach a complete menu of items being served.

PLEASE CHECK WHICH THAT APPLIES TO YOUR REQUEST:

1) TO SERVE AT ONE CONCERT _____

2) TO SERVE AT MULTIPLE CONCERTS _____ HOW MANY _____

Concerts are Wednesday evenings from June 7, 2017 through August 16, 2017

PLEASE ATTACH THE FOLLOWING CERTIFICATES/LICENSES:

1. Attach a current copy of the following:
 - a. Food Handler's certificate
 - b. Health Department certificate/license issued by San Luis Obispo (SLO) County
 - c. Temporary Food Facility Permit, obtained from SLO County
 - d. Mobile Food Facility Permit, obtained from SLO County
 - e. Business license
 - f. ABC license/permit
 - g. Copy of Liability Insurance- MUST Name TCSD as additional insured
 - h. If you need to use a generator you must get approval from TCSD.

Vendor Applicant Signature _____

By signing here you are acknowledging you have read and agree to all vendor policies as stated