

**LASSEN COUNTY ENVIRONMENTAL HEALTH DEPARTMENT  
TEMPORARY FOOD FACILITY PERMIT APPLICATION**

**Organization/Group Name:** \_\_\_\_\_

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

**Name of Authorized Representative:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name of Event:** \_\_\_\_\_ **Date of Event:** \_\_\_\_\_

**Event Sponsor:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Event Address:** \_\_\_\_\_

**Food(s) and/or beverage(s) to be sold:** \_\_\_\_\_

**Prepackaged food and drinks only?**    **Yes**    **No**

**Location(s) of preparation:** \_\_\_\_\_

**Date(s) of preparation:** \_\_\_\_\_

**Signature of Authorized Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*\*\*

**PERMIT APPLICATION IS DUE NO LATER THAN FIVE (5) DAYS PRIOR TO EVENT**

**Please return to:**

**Lassen County Environmental Health Department, 1445 Paul Bunyan Drive, Suite B, Susanville, CA 96130**

\_\_\_\_\_ **Date:** \_\_\_\_\_

**Environmental Health Specialist**