



City of Bullard

P. O. Box 107 | 114 S Phillips St,
Bullard, TX 75757

P: (903) 894-7223 F: (903) 894-8163
www.bullardtexas.net

TEMPORARY FOOD ESTABLISHMENT PERMIT APPLICATION

Food/Beverage Vendors, please read the following:

- Separate form and permit required for each temporary food establishment.
- A separate Coordinator application form must be submitted by the coordinator of the single event or celebration. Otherwise, your application may be null and void.
- Each proposed Temporary Food Establishment must submit an application for a NET Health Temporary Food Establishment Permit. At least 7 days prior to the event or be subject to a \$100.00 administrative fee.
- The food vendor(s) is/are responsible for submitting the **Temporary Food Establishment Permit Application** to NET Health.

Applicant/Owner Information:

Name of Temporary Food Establishment: _____

Name of Owner: _____

Contact Phone #: _____ Email Address (Required): _____

Address of Responsible Owner:

Street

City

State

Zip Code

NET Health Permit # _____ Application Date: _____

Please list ALL county(s) in which you are permitted by NET Health:

Event Information:

Name of Single Event or Celebration: _____

Date & Time of Single Event or Celebration: _____

Contact Phone #: _____ Email Address (Required): _____

Location of Single Event or Celebration:

Street

City

State

Zip Code



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Coordinator responsible for the Single Event or Celebration:

Name: _____

Contact Phone #: _____ **Email Address (Required):** _____

Address of Responsible Owner:

Street	City	State	Zip Code
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In order to host these types of events, the designated coordinator needs to ensure the following 2 documents are completed for the local health department when food or beverages will be offered to the public:

- **Event Coordinator Application**
- **Temporary Food Permit Application**

The organizer of a single event or celebration where food is to be provided must complete an **Event Coordinator Application**. This form provides necessary information to support the single event or celebration and designate the recognized food vendors.

The food vendor(s) is/are responsible for submitting the **Temporary Food Establishment Permit Application**.

Both applications can be found by clicking the link below:

<https://www.mynethealth.org/services/environmental-health/food-safety-permits-inspections/temporary-food-establishments/>

All information provided on this application is true and correct to the applicant knowledge and belief. Applicant acknowledges that the permit applied for shall be subject to all provisions of the codes and statutes and all rules adopted under the codes and statutes of the State of Texas governing food service operations. Applicant attests to having read associated information in this application which details responsibilities and requirements for the concession operation and agrees to comply with requirements acknowledging that failure to comply may result in immediate cessation of operations. By signing this application, the above listed applicant authorizes the City of Bullard to perform a background investigation.

Applicant's Signature: _____ **Date:** _____