



# Temporary Food Event Application

## COVID-19 GUIDANCE ACKNOWLEDGEMENT

In response to the COVID-19 pandemic, the Health Authority for Austin-Travis County adopted Health Authority Rules designed to reduce the transmission of COVID-19 in our community and keep citizens safe.

These rules have now been turned into recommendations for individuals and sites within the City of Austin and Travis County to protect public health by minimizing the spread of COVID-19.

When planning temporary food events, please consider the following COVID-19 prevention measures:

### **EVENT RECOMMENDATIONS:**

➤ **POSSIBLE POSITIVE CASE NOTIFICATION**

- If a positive case of COVID-19 is identified before, during, and/or after the event it should be reported to Austin Public Health at [aph.preparedness@austintexas.gov](mailto:aph.preparedness@austintexas.gov).

➤ **MESSAGING PRIOR TO THE EVENT AND ON SITE**

- The event organizer should promote prevention of virus transmission among attendees.
- Any promotional materials for a public event (flyers, social media posts, etc.) should include the [City of Austin Coronavirus Hygiene Flyer](#), this flyer should be posted at each entrance and on each restroom door.

➤ **FACE COVERING/MASKING IS RECOMMENDED**

- Face masks provide the best protection to you and others in preventing the spread of COVID-19.
- It is highly recommended that non-vaccinated individuals wear a face mask when not eating or drinking.

➤ **SOCIAL DISTANCING**

- Recommend that groups should be spaced at least three feet apart throughout the event.

➤ **FOOD AND BEVERAGE SERVICE**

- Recommend at least three feet between tables unless the tables are separated by a solid barrier; and
- Limit the number of individuals who gather, stand, or sit together to ten or fewer.

APPLICANT

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SIGN

DATE

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PRINT NAME

FOR OFFICE USE

Received \_\_\_\_\_ Paid On: \_\_\_\_\_ Check #: \_\_\_\_\_ Amount: \_\_\_\_\_ Receipt: \_\_\_\_\_  
Initial: \_\_\_\_\_ Issue On: \_\_\_\_\_ Expires On: \_\_\_\_\_ Permit: \_\_\_\_\_ Juris: COA / TC / ILA



AUSTIN PUBLIC HEALTH  
ENVIRONMENTAL HEALTH SERVICES DIVISION  
P.O. BOX 142529 Austin, TX 78714  
Phone (512) 978-0300 Email: [ehsd.service@austintexas.gov](mailto:ehsd.service@austintexas.gov)  
<http://www.austintexas.gov/ehsd>



Walk-in Location: 1520 Rutherford LN, NE corner of Rutherford LN @ Cameron RD, Building 1 East Entrance (Not a Mailing Address)

**Temporary Food Event Application**  
**\*\* Submit at least 10 calendar days prior to the event date. \*\***

**Responsibilities & Acknowledgements (Initials Required)**

**Responsibilities**

- The temporary event organizer (**not the individual booth operator**) is required to obtain all necessary Temporary Food Booth Permits for each booth at the event.
- Food booth(s) must be set-up and ready for inspection at the hours listed under the Hours of Operation for each day.

**Application Submission**

- Applicants submitting in person must pay at time of submission.
- Applicants submitting by email will be contacted by phone for a credit card payment.
- **Travis County applications may only be submitted in person and can only be paid by cash or check.**

**Application Deadline**

- Submit completed applications to the department at least 10 calendar days prior to the scheduled event.
- Applications submitted less than 10 calendar days prior to the start of the event may not be approved and will be subject to a \$100.00 expedited review fee.

**Issue & Delivery**

- Permits are non-transferable
- Permits must be picked up in person, at the Walk-in Location. (1520 Rutherford Ln)
- Permits are available for pick-up Monday through Friday 7:45 AM to 3:30 PM.
- Individuals/Organizations may not obtain more than six (6) events per calendar year (Max 84 event days).

**Re-Issues**

- Permits may be reissued by the department due to schedule changes; subject to departmental discretion.
- Reissue requests and/or cancellations must be received within 24 hours of the event date and state a valid reason for the reissuance such as a 'rain out' or emergency cancellation.

I acknowledge that completion of this application does not guarantee a permit will be issued by the department. I further acknowledge that any permit granted will be subject to the Local and State Codes under which the permit is granted.  
\_\_\_\_\_  
Applicant Initials

**Terms & Definitions**

**Food Booth:** Any stall or partitioned stand used to present, prepare, or provide food to the general public. (Typically 10 feet by 10 feet with tent and table set up.)  
**Temporary Event:** Any organized event or celebration that serves food or provides open beverage service taking place at a location for no more than 14 consecutive days in conjunction with an organized event or celebration.  
**1 Booth, 1 Calendar Day, Single Event:** A single event that lasts only one day and consists of only one booth, not connected to any other event taking place at the same location or same time.

**What to Submit with the Application**

- |   |                                    |
|---|------------------------------------|
| 1. Temporary Food Event Application       | Submit Page 1 & Page 2             |
| 2. Booth Responsible Party Identification | Submit 1 per food booth            |
| 3. Individual Booth Listing               | Submit as many sheets as necessary |
| 4. Valid Government Issued Photo ID       | Submit a clear copy                |



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### Temporary Food Event Application

**\*\* Submit at least 10 calendar days prior to the event date. \*\***

#### Event Information

Note: Incomplete applications will not be processed and will be returned

<b>Event Name:</b> _____	<b>Total Booths:</b> _____
<b>Event Address:</b> _____	_____
Street _____	City _____ State _____ Zip Code _____
<b>Event Dates:</b> _____	<b>Hours of Operation:</b> _____
Start Date (MM/DD/YYYY) _____	End Date (MM/DD/YYYY) _____

#### Event Organizer

Print full legal names as they would appear on a Government Issued Photo ID(s)

<b>Organizer Name:</b> _____		
Last _____	First _____	Middle _____
<b>Mail Address:</b> _____		
Street _____	City _____	State _____ Zip Code _____
<b>Driver's License:</b> _____		<b>Date of Birth:</b> _____
DL # _____	State _____	MM/DD/YYYY _____
<b>Phone Number:</b> _____		<b>Email:</b> _____
(###) ### - #####		Email addresses will not be distributed. (Internal use only)

**\*\*\*\* Attach a Clear Copy of a Valid Government Issued Photo ID \*\*\*\***

#### Fee Information:

All temporary event application fees are nonrefundable.

	City of Austin	Contracted Municipalities <sup>1</sup> (ILA)	Travis County (Unincorporated)
<i>Pricing Structure Based on Jurisdiction of Event Location</i>			
<i>Number of Days/Booths</i>			
1 Booth, 1 Calendar Day, Single Event <sup>2</sup>	\$57.00	\$57.00	N/A
1 - 5 Calendar Days, 1 or More Booths	\$114.00/Booth	\$114.00/Booth	\$98.00/Booth
6 - 14 Calendar Days, 1 or More Booths	\$172.00/Booth	\$172.00/Booth	\$145.00/Booth
Expedited Permit (Less than 10 days prior to the date of event)	\$100.00/Event	\$100.00/Event	N/A
<sup>1</sup> Not limited to Bee Cave, Lakeway, Manor, Rollingwood, Sunset Valley, Volente, Westlake Hills			
<sup>2</sup> Price for single event with only 1 booth for 1 calendar day, not connected to any other event taking place at the same location, same time.			
	<b>City of Austin</b>	<b>Contracted Municipalities<sup>1</sup> (ILA)</b>	<b>Travis County (Unincorporated)</b>
<b>Fee Exemptions Reasons</b>	<input type="checkbox"/> Social Services Contract		<input type="checkbox"/> Non-Profit Organizations
<i>Based on Jurisdiction of Event Location</i>	<input type="checkbox"/> City of Austin sponsored	N/A	<input type="checkbox"/> Public/Charter School
	<input type="checkbox"/> Public/Charter School		

*Must provide supporting documentation to be eligible for Fee Exemptions.*

#### DO NOT MAIL CASH PAYMENTS

**Payment Forms Accepted: Cash, Check, Money Order, Visa, MasterCard, Discover, AMEX**

Make checks and money orders payable to: Austin Public Health

Credit cards not accepted for Travis County payments.

Payment must accompany applications submitted by mail (Environmental Health Services Division, PO BOX 142529, Austin, TX 78714) or in person at the walk-in location (1520 Rutherford LN). For customers submitting via email ([ehsd.service@austintexas.gov](mailto:ehsd.service@austintexas.gov)) please note that an EHSD representative will contact you by phone to collect a credit card payment.

Applicant's Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

I acknowledge that all information supplied above is true and correct to the best of my knowledge and belief. I further acknowledge that the permit, for which I am applying, is subject to all provisions of the orders and ordinances of Austin & Travis County, and all of the provisions of the codes, statutes and rules adopted under the codes and statutes of the State of Texas governing food establishments.



**Individual Booth Listing**  
**Food & Beverage Booth Information**

*List each booth participating in the event by name and provide a list of the food and/or beverages the booth will offer to the public. Print additional copies of the 'Food & Beverage Booth Information' sheet, if necessary.*

1. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
2. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
3. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
4. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
5. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
6. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
7. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
8. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
9. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
10. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
11. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
12. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
13. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
14. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_
15. Booth Name: \_\_\_\_\_  
Food/Beverage: \_\_\_\_\_