



Mariposa County Health Department

Charles B. Mosher, MD, MPH, County Health Officer

Public Health Section
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Environmental Health Section
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“One Day Only Special Events” Food Facility No Fee Required Application for Permit to Operate

Each Booth/Facility, etc., Must Have a Separate Application

Name of Event: _____

Address of Event: _____

Dates of Event: From: _____ To: _____

of Booths/Facilities: _____ # of Employees: _____

Have you participated in this event in previous years? YES NO If yes, state years: _____

Do you have a current annual Mariposa County Food Permit? YES NO

Business Name: _____

Owner/Operator: _____

Mailing Address: _____

Contact Person: _____ Phone: _____

Please Check to indicate that you have received and understand the “Guidelines for Temporary Food Facilities”

Signature of Applicant

Please Print

Date

Office Use Only

Approved by: _____

OW: _____

PR: _____

FA: _____

PT: _____