



## HEALTH AND HUMAN SERVICES

Courthouse Annex  
212 2nd Ave S  
Long Prairie, MN 56347  
Phone: 320-732-4500  
Fax: 320-732-4540

Branch Office  
200 1st St NE, Suite 1  
Staples, MN 56479  
Phone: 218-894-6300  
Fax: 218-894-2878

### **2025 LICENSE APPLICATION FOR A SPECIAL EVENT FOOD LICENSE**

A SPECIAL EVENT FOOD STAND IS A FOOD AND BEVERAGE SERVICE STAND WHICH IS USED IN CONJUNCTION WITH CELEBRATIONS AND SPECIAL EVENTS, AND WHICH OPERATES NO MORE THAN TEN (10) TOTAL DAYS ANNUALLY. (MN STATUTE 157.15, SUBDIVISION 14).

ORGANIZATIONS MAY HAVE MULTIPLE EVENTS, UP TO 10 DAYS TOTAL FOR THE \$50.00 FEE. THE SUPPLEMENT PAGE AT THE END OF THIS APPLICATION NEEDS TO BE COMPLETED AND SUBMITTED TO TODD COUNTY HEALTH & HUMAN SERVICES ENVIRONMENTAL HEALTH PROGRAM 14 DAYS PRIOR TO ADDITIONAL EVENTS.

#### **APPLICANT INFORMATION:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

(Individual, business, or group operating stand)

Mailing Address: \_\_\_\_\_

(Street, PO Box, City, State, Zip)

Telephone: H: \_\_\_\_\_ W: \_\_\_\_\_

E-mail address: \_\_\_\_\_

#### **EVENT INFORMATION: FILL OUT THE SUPPLEMENTAL EVENT PAGE AT THE END OF THIS DOCUMENT IF THE MENU YOU ARE SERVING IS NOT EXACTLY THE SAME AT EACH EVENT**

Name of event: \_\_\_\_\_

Event location: \_\_\_\_\_  
(Street address, City)

Location where food is prepared: \_\_\_\_\_  
(On site, or name and address of permanent facility with an approved kitchen)

Person in charge of food preparation: \_\_\_\_\_

Date(s) of event: \_\_\_\_\_  
\_\_\_\_\_

Time(s) of food service: Begin: a.m./p.m. \_\_\_\_\_ End: a.m./p.m. \_\_\_\_\_  
(Duration of time food will be served to the public)

**Complete the following information. Select one option from each category:**

1. **FACILITIES:**

A. HANDWASHING FACILITIES:

**Handwashing facilities are required within the food service site. Select one of the following methods:**

- ☐ Permanent handwashing sink
- ☐ Temporary handwashing station\*
- ☐ Portable handwashing station (per enclosed guidelines)\*

B. DISHWASHING FACILITIES:

**Dishwashing facilities are required within the food service site. Select one of the following methods:**

- ☐ Permanent three-compartment sink
- ☐ Temporary dishwashing station (per enclosed guidelines)\*

**\*If permanent handwashing and dishwashing facilities are not provided within the food service site, the menu shall be restricted to the following items:**

- i. beverages served in their original container, or bulk beverages served from a dispenser;
- ii. pre-packaged non-potentially hazardous foods;
- iii. pre-packaged potentially hazardous foods\*\* cooked or prepared to order, or pre-cut/pre-washed foods that have been obtained from a licensed food establishment.

**\*\*Potentially hazardous foods (PHFs) include:**

- i. raw or heat-treated foods from an animal origin (i.e. eggs, milk, meat, poultry);
- ii. heat-treated foods from a plant origin (i.e. cooked rice, cooked potatoes, cooked noodles);
- iii. raw seed sprouts;
- iv. cut melons (watermelon, cantaloupe, honeydew);
- v. garlic and oil mixtures.

3. **WATER SOURCE:**

- ☐ Municipal (city water)
- ☐ Private well

4. **LIQUID/SOLID WASTE DISPOSAL:**

- ☐ Municipal
- ☐ Private septic system
- ☐ Self-contained, mobile unit

5. **MENU:** \_\_\_\_\_ **EVENT** \_\_\_\_\_ **LOCATION** \_\_\_\_\_

THE REGULATORY AUTHORITY MAY RESTRICT THE TYPE OF FOOD SERVED OR THE METHOD OF FOOD PREPARATION BASED ON EQUIPMENT LIMITATIONS, THE UNAVAILABILITY OF A PERMANENT ESTABLISHMENT FOR UTENSIL AND WAREWASHING, ADVERSE CLIMATIC CONDITIONS, OR ANY OTHER CONDITION THAT POSES A HAZARD TO PUBLIC HEALTH. (MN RULES 4626.1855, SUBPART R).

**List all menu items that will be served, the approved source where menu items will be purchased from (grocery store, deli, commercial distributor, etc.), the food storage method used to keep cold foods at or below 41°F (mechanical refrigeration\* or freezer, dry ice, cooler, etc.), all food preparation equipment (gas grill, oven range, etc.), and all food holding equipment used to keep hot foods at or above 135°F.**

<u>Menu item</u>	<u>Source</u>	<u>Storage*</u>	<u>Preparation equipment</u>	<u>Holding equipment</u>
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

**\*Mechanical refrigeration is required for storing potentially hazardous foods held for four (4) hours or longer.**

**THIS APPLICATION IS APPROVED ONLY FOR OPERATION AS SPECIFIED ABOVE. ADDITIONAL APPROVAL IS REQUIRED FOR ANY CHANGES.**

## **LICENSE CATEGORY AND FEE SCHEDULE:**

APPLICATIONS MUST BE RECEIVED BY THIS OFFICE NO LATER THAN FOURTEEN (14) DAYS PRIOR TO THE EVENT. A LATE FEE WILL BE ADDED TO ALL APPLICATIONS NOT RECEIVED FOURTEEN (14) DAYS PRIOR TO THE EVENT, AS WELL AS TO LICENSES ISSUED ON SITE. TO RECEIVE THE FOOD SAFETY TRAINING COURSE DISCOUNT, A COPY OF THE FOOD SAFETY COURSE CERTIFICATE MUST ACCOMPANY THE LICENSE APPLICATION.

**Select each applicable fee:**

<u>  \$50.00  </u>	Special Event Food Stand Fee – up to 10 total days ( may have multiple events)
+ <u>          </u>	\$20.00 – Late Fee (if application is not received 14 days prior to the event)
- <u>          </u>	\$10.00 – Food Safety Class Discount (copy of Food Safety Training Certificate)
<u>          </u>	Total

NOTICE: THE ISSUANCE OF A DISHONORED CHECK TO THIS DEPARTMENT WILL REQUIRE A SERVICE CHARGE OF THIRTY DOLLARS (\$30.00) PER CHECK.  
(MN STATUTE 604.113).

**I have received and read the Minnesota Department of Health Fact Sheet – Special Event Food Stand. I do hereby certify that I will comply with all of the requirements, and that the information provided on this application is accurate and complete.**

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's printed name: \_\_\_\_\_

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FOR INTERNAL OFFICE USE ONLY:

\$ \_\_\_\_\_ TOTAL AMOUNT PAID \_\_\_\_\_ CHECK # / CASH \_\_\_\_\_ DATE

Received by:

\_\_\_\_\_

Reviewed by:

\_\_\_\_\_

Approved? \_\_\_\_\_ Yes \_\_\_\_\_ No

Additional comments:

\_\_\_\_\_

\_\_\_\_\_

Supplement page for additional days or events. Not to exceed 10 total days in a calendar year.

Event # \_\_\_\_\_

Organization that submitted initial application: \_\_\_\_\_

**Event Information**

Name of event: \_\_\_\_\_ Date: \_\_\_\_\_

Event location: \_\_\_\_\_

(Street address, City)

Location where food is prepared: \_\_\_\_\_

Person in charge of food preparation: \_\_\_\_\_

Time of food service: Begin: a.m./p.m. \_\_\_\_\_ End: a.m./p.m. \_\_\_\_\_

List all menu items that will be served, the approved source where menu items will be purchased from (grocery store, deli, commercial distributor, etc.), the food storage method used to keep cold foods at or below 41° F (mechanical refrigeration\* or freezer, dry ice, cooler, etc.), all food preparation equipment (gas grill, oven range, etc.), and all food holding equipment used to keep hot foods at or above 140 ° F

<u>Menu Item</u>	<u>Source</u>	<u>Storage*</u>	<u>Preparation equipment</u>	<u>Holding equipment</u>
1.				
2.				
3.				
4.				
5.				
6.				

\*Mechanical refrigeration is required for storing potentially hazardous foods held for four (4) hours or longer.

Reviewed by: \_\_\_\_\_ Approved? \_\_\_\_ Yes \_\_\_\_ No

Additional comments:

\_\_\_\_\_  
\_\_\_\_\_

**THIS APPLICATION IS APPROVED ONLY FOR OPERATION AS SPECIFIED ABOVE.  
ADDITIONAL APPROVAL IS REQUIRED FOR ANY CHANGES.**