

University of Houston – Clear Lake
Temporary Food & Special Events Permit Request Form

*This form must be **filled out completely** and approved by UHCL Risk Management Five (5) – Seven (7) working days **prior to the event**. You will receive an email confirmation upon approval. You may call 281-283-2104 with any questions or for more information.*

1. Organization: _____

Responsible Party Name: _____ Telephone: _____

Email: (to return approved permit) _____

2. Food Permit Request Special Event Request Will there be Open Flames?

3. Reason for the Event? _____

Date of Activity? _____ Time of Activity: From _____ am pm To _____ am pm

If food is served >4 hours, food must be rotated out and equipment cleaned every 4 hours (max food holding time).

Location where the food operation will occur: _____

4. List all **food items** to be served: _____

List all **perishable ingredients** to be served: _____

Ingredients having a high moisture content (>50%) or that lack preservatives can be susceptible to increased microbial activity if kept between 40° and 140 °F.

5. **Where** will the food be **prepared** and by **Whom**? _____

How will food be **prepared** (what cooking device)? _____

6. **Food will be kept hot** (greater than 140°F) **or cold** (less than 40°F) **during event** by?

Electric skillet, crock pot, sterno warmer, ice other: _____

How will food be **kept hot or cold during transport** to UHCL (if applicable)? _____

Hot foods that drop below 140 °F during transport must rapidly be brought back up to appropriate temperature; e.g. using a microwave, electric skillet, or similar device.

7. Food served by: self-serve (tongs or equivalent serving utensils must be available)
 host serve (server must have hair covers or baseball caps plus food service)
 vendor serve (server must have hair covers or baseball caps plus food service gloves)

8. Will the food operation use **fuels to keep warm**? open grill, barbecue pit, sterno, or
 other: _____

9. Will the Special Event require the use of candles or other open flames?

10. If yes to numbers 8 or 9 above, will a portable fire extinguisher of the appropriate size be provided or available within 25 feet? Y / N If no, **extinguishers may be borrowed from Risk Management, x.2106.**

11. If fire requested, who will be the designated Fire Watch? _____

(This person will need to take training at www.FireExtinguisher.com before this permit can be issued)

I have read, understand, and agree to abide by the policies, procedures and guidelines which address the usage of the Temporary Food Dealer's & Special Events Permit for food service and/or open flames.

Requestor's Name (printed): _____

Requestor's Signature: _____ Date: _____

Risk Management Dept – Permit Issuer's Name _____

Permit Issuer's Signature: _____ Date: _____

Permit approval conditions: _____

Please Return Completed Form to UHCL Risk Management by email: Gauthier@uhcl.edu or fax: 281-226-7187