

Date of Application: \_\_\_\_\_ Business Name: \_\_\_\_\_

Special Event: \_\_\_\_\_ Event Date(s): \_\_\_\_\_ Total Days: \_\_\_\_\_

**City of Harrisburg  
Special Event Health License**

A health license is required for all food and beverage vendor/stands in the City of Harrisburg. You are exempt from said license if you already hold a Class D license. A license is good for one stand, which is defined as less than one continuous roof/cover and/or one trailer. **Each stand must have a valid license.** *If you license and/or registered by another municipality or state, attach copy of license/registration.*

**Type F License: Number of Days: \_\_\_\_\_ x \$15/day = \$ \_\_\_\_\_ Amount Due**

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Mailing Address (If different than above): \_\_\_\_\_

Business Telephone #: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone#: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Mailing Address (If different than above): \_\_\_\_\_

Owner's Telephone #: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone#: \_\_\_\_\_

If the individual operating the stand during event is not the owner, the following must be completed:

Manager's Name	Daytime #	Evening #
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***A Sketch or picture of stand with a list of all equipment must accompany this application.***

- All equipment must meet National Sanitation Foundation specifications.
- All stands are required to have potable water, the ability to warm water for utensil washing, soap & towels for hand washing and an approved sanitizing solution.
- Appropriately equipped heating and refrigeration units capable of holding hot foods at or above 135°F and cold foods at or below 41°F

***On the back of this application, or as an attachment, provide:***

- A copy of PA Food Employee certification card for supervising staff person.
- A detailed listing of proposed foods and/or menu.
- A list of Wholesaler(s) / Supplier(s) and their address and phone number(s).

License Total: \$ \_\_\_\_\_

**Double Permit fee if submitted less than 10 days prior to event:                      x2**

Total Due:        \$ \_\_\_\_\_

**Detailed List of Proposed Food and/or Menu**

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**List of Wholesaler(s) / Supplier(s)**

<b>Name</b>	<b>Address</b>	<b>Phone</b>
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**Any Additional Information:** \_\_\_\_\_

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