



CITY OF SAINT PAUL
 Christopher B. Coleman, Mayor

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CITY OF SAINT PAUL
TEMPORARY FOOD LICENSE APPLICATION
THIS APPLICATION IS SUBJECT TO REVIEW BY THE PUBLIC
 PLEASE TYPE OR PRINT IN INK

Welcome to the City of Saint Paul! Saint Paul is proud of the wide variety of festivals held within the City each year. We welcome your participation in these events that help us celebrate our diversity. The following table lists the types of temporary licenses available.

LATE FEE: This application and appropriate fees, must be submitted a minimum of seven (7) business days prior to the first day of the special event. Applications received less than seven (7) business days prior to the event shall incur a late fee equal to fifty (50) percent of the license fee.

Type of License being applied for (circle one):
 See Temporary Food License fee calculation sheet to determine total fee due.

Special Event 1-3 Days (1 event only) Base Size – 150 sq. ft.	Special Event (4-10 days) (1 event only) Base Size – 150 sq. ft.	Non-Profit Organization Base Size – 150 sq. ft.	Special Event Food Sales Extension Base Size – 150 sq. ft.	Retail Food Establishment Temporary	Food Giveaway Not more than 3 consecutive days	Customer Appreciation Food Sales One event up to 3 consecutive days (Only 2 events every 12 months)
BASE FEE \$190.00	BASE FEE \$217.00	BASE FEE \$55.00	BASE FEE \$109.00	\$65.00	\$55.00	\$55.00
Overall Size _____ SQ FT	Overall Size _____ SQ FT	Overall Size _____ SQ FT	Overall Size _____ SQ FT	Each additional location fee: \$85.00		

Each additional 150 sq. foot portion OVER the base size will incur an additional 25% of the BASE FEE. The total area used for the display, preparation, processing, storage and sale of foods shall be used. If the size of your food booth is greater than 150 square feet, please see Temporary Food License Fee Chart to determine the actual license fee.

*Please note: Applicants must obtain the approval of event organizers prior to application if they wish to operate at an event that has a block party. Vendors can not operate within 2000 feet (approximately 5 blocks) of an event where a block party permit has been obtained without permission of the event organizer.

Business/Organization Name: _____

Business/Organization Address: _____

Mail-To Address: _____

Food Contact Name and Phone Number: _____

Event Date(s) **Event Name:** **Event Hours:**

Start Date _____ **Details About Event Location:**
 (Example: St. Paul address, cross streets, name of park, or street boundaries, etc.)

End Date _____

MINNESOTA TAX IDENTIFICATION NUMBER – Pursuant to the Laws of Minnesota, 2005, Chapter 151, Article 1, Section 117 (270C.72) (Tax Clearance; Issuance of Licenses), licensing authorities are required to provide to the State of Minnesota Commissioner of Revenue, the Minnesota business tax identification number and the social security number of each license applicant. Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of the **Minnesota Tax Identification Number**:

- This information may be used to deny the issuance or renewal of your license in the event you owe Minnesota sales, employer’s withholding or motor vehicle excise taxes;
- Upon receiving this information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement, the Department of Revenue may supply this information to the Internal Revenue Service.

Minnesota Tax Identification Numbers (Sales & Use Tax Number) may be obtained from the State of Minnesota, Business Records Department, 600 Robert Street North, Saint Paul, MN (651-296-6181).

Minnesota Tax Identification Number / Tax Exemption Number: _____

If a Minnesota Tax Identification Number is not required for the business being operated, indicate so by placing an “X” in the box.

CERTIFICATION OF WORKERS’ COMPENSATION COVERAGE PURSUANT TO MINNESOTA STATUTE 176.182

I hereby certify that I, or my company, am in compliance with the workers’ compensation insurance coverage requirements of Minnesota Statute 176.182, subdivision 2. I also understand that provision of false information in this certification constitutes sufficient grounds for adverse action against all licenses held, including revocation and suspension of said licenses:

Name of Insurance Company: _____

Policy Number: _____ Coverage from: _____ To: _____

I have no employees covered under workers’ compensation insurance _____ (Initials)

ANY FALSIFICATION OF ANSWERS GIVEN OR MATERIAL SUBMITTED WILL RESULT IN DENIAL OF THIS APPLICATION

I hereby state that I have answered all of the preceding questions, and that the information contained herein and on the Environmental Food and Equipment Review Form is true and correct to the best of my knowledge and belief. I also understand this premise may be inspected by police, fire, health and other city officials at any and all times when the business is in operation. In addition, I have reviewed and agree to follow, the Environmental Health “**Guidelines for Temporary Food Operations**” that I have been given as part of this application.



Signature (REQUIRED for all applications)

Date

We will accept payment by cash, check (made payable to City of Saint Paul) or credit card.

NO CHECKS WILL BE ACCEPTED LESS THAN EIGHT (8) CALENDAR DAYS BEFORE THE EVENT.

To non-profit organizations: Attach proof of non-profit status. A copy of one of the following:

- State Tax-Exempt Status Form Federal Form #501C3 Federal Form 990 or 990T (front page)
- Non-Profit Articles of Incorporation Proof that license use is for an event for the benefit of a non-profit organization

APPLICATION INSTRUCTIONS: Applications can be reviewed, approved, and processed in any of the following ways:

- IN PERSON** You can complete this application at our office located at 375 Jackson Street, Suite 220, (Skyway Level) in Saint Paul between the hours of 7:30 am – 4:30 pm, Monday through Friday.
- BY APPOINTMENT** Contact Barbara McMonigal-St.Dennis, Environmental Health Specialist II, at (651) 266-9137 to schedule an appointment.
- BY MAIL** Your application can be mailed with the appropriate payment enclosed to the Department of Safety and Inspections, 375 Jackson Street, Suite 220, Saint Paul, Minnesota 55101-1806, Attention: Barbara McMonigal-St.Dennis.
- BY FAX** Fax your application to (651) 266-9124, Attention: Barbara McMonigal-St.Dennis, then immediately mail your payment to the Department of Safety and Inspections, 375 Jackson Street, Suite 220, Saint Paul, Minnesota 55101-1806, Attention: Barbara McMonigal-St.Dennis.

Signature of Cardholder (required for all charges): _____

IF PAYING BY CREDIT CARD PLEASE COMPLETE THE FOLLOWING INFORMATION:



- American Express Discover MasterCard Visa

EXPIRATION DATE: ACCOUNT NUMBER: /

Instructions for Completing Food & Equipment Review Form

1. Name and Ingredients of Food/Beverage to Be Served

Provide the name(s) of **all** menu item(s) and the ingredients used to make each item. Any change in menu items must be submitted to the DSI office in writing for approval a minimum of seven (7) days prior to the event.

2. Food Source

List the name and address of the sources of all food items. All food products must be from approved sources such as commercially prepared foods or foods prepared at a licensed approved kitchen. All meats must be United States Department of Agriculture (USDA) inspected. **No home prepared foods are permitted.**

3. Condiments

List the condiments to be provided for customers and how they will be dispensed. (Packets, Squeeze Bottles, Pump Dispensers, etc.)

4. Hair Restraint

Hair restraints (hair nets, caps, etc.) **are required** of all employees handling food and clean equipment/utensils. Indicate the type of hair restraints to be used.

5. Overhead Protection

When a stand is located outdoors, the **stand must have a covered roof, canopy or other type of approved covering**. The covering must provide protection from adverse weather, birds, or other sources of overhead contamination. If the covering should fail, all food activities must cease until adequate protection is provided.

6. Type of Sanitizer

List the type(s) of sanitizer to be used for utensil washing and wiping cloths. (e.g. bleach + water solution, quaternary ammonium solution)

7. Dish & Utensil Washing

Indicate if utensils are washed on-site or if they will be taken to a licensed food establishment to be cleaned and sanitized. See **“Guidelines for temporary food operations”** for on-site utensil washing requirements.

8. Hand Washing

Describe facilities that will be used for hand washing, such as portable hand sink, gravity hand sink, etc.

9. Describe How, When and Where Food will Be Prepared, Transported & Stored (Prior to & During the Event)

Describe the process or steps that will be used to prepare the foods to be served such as washing/cutting of produce, methods to be used for cooking and cooling, how food items will be stored before and during the event. Describe and/or list all vehicles and equipment that will be used to transport food items including equipment and methods used to maintain foods cold or hot.

10. List & Describe All On-Site Cooking Equipment

List and describe the **cooking** equipment that will be used at the event. Examples are stoves, burners, grills, fryers, microwave oven, rice cooker, etc. Also indicate if equipment operates using electricity, propane, butane, charcoal, etc. Indicate how adequate electrical power will be provided, such as accessing local power or using generator.

11. Hot Holding Equipment

List and describe the equipment that will be used to maintain cooked food hot during the event. Examples are stoves, burners, rice cooker, steam table, etc. (Do not use the generic term warmer.) Also indicate if equipment operates using electricity, propane, butane, etc. The use of sterno or heat lamps are not permitted for outdoor events. Indicate how adequate electrical power will be provided, such as accessing local power or using generator.

12. Cold Holding Equipment

List and describe the equipment that will be used to maintain potentially hazardous foods at 41 degrees Fahrenheit or less during the event. Examples are mechanical refrigeration, coolers, refrigerators, chest freezers, refrigerated prep table, etc. The use of ice packs or dry ice must be approved. Drained wet ice is permitted for the storage or canned soda, bottled water or other non-potentially hazardous bottled or canned drinks.

13. Identify Source & Storage of Water for Food Stand

Identify source of water and how water will be transported and stored for use in the food stand. Water must come from an approved source such as an approved public water supply or commercially bottled water. Water must be transported and stored in an approved container. If a hose is used, it must be food grade and a backflow prevention device must be provided.

(10) LIST & DESCRIBE ALL ON-SITE COOKING EQUIPMENT

(11) HOT HOLDING EQUIPMENT

(12) COLD HOLDING EQUIPMENT

(13) IDENTIFY SOURCE OF WATER FOR FOOD STAND AND FACILITY FOR STORING WATER

TEMPORARY FOOD LICENSE FEE CHART

For a Single Booth/Stand/Tent or the Largest Booth/Stand/Tent That Will be Used When Operating Multiple Locations at the Same Event. **Any additional locations operated by the applicant at the same event, will require a separate \$85.00 special event license for each additional location.**

Special Event Food Establishment License Fee

The license fee for a special event food establishment shall be determined by the total area used for the display, preparation, processing, storage and sale of foods. The base size for a special event food establishment shall be one hundred fifty (150) square feet. Each one hundred fifty (150) square foot area or portion thereof in excess shall incur a separate license fee. Larger and/or additional food establishment sizes require additional review and inspection by the Department of Safety and Inspections (DSI). Multiple locations, by an operator, at a single event, will require a separate \$85.00 special event license for each additional location.

Use chart below to find fee for a single food booth/stand/tent or the Largest Booth/Stand/Tent if there will be multiple locations at the same event.

SQUARE FOOTAGE	Special Event (1-3 Days)	Special Event (4-10 days)	Non-Profit Organization	Special Event Food Sales Extension
1-150	\$190.00	\$217.00	\$55.00	\$109.00
151- 300	\$237.50	\$271.25	\$68.75	\$136.25
301-450	\$285.00	\$325.50	\$82.50	\$163.50
451-600	\$332.50	\$379.75	\$96.25	\$190.75
601-750	\$380.00	\$434.00	\$110.00	\$218.00
751-1900	\$427.50	\$488.25	\$123.75	\$245.25
901-1050	\$475.00	\$542.50	\$137.50	\$272.50
1051-1200	\$522.50	\$596.75	\$151.25	\$299.75
1201-1350	\$570.00	\$651.00	\$165.00	\$327.00
1351-1500	\$617.50	\$705.25	\$178.75	\$354.25
1501-1650	\$665.00	\$759.50	\$192.50	\$381.50
1651-1800	\$712.50	\$813.75	\$206.25	\$408.75
1801-1950	\$760.00	\$868.00	\$220.00	\$436.00
1951-2100	\$807.50	\$922.25	\$233.75	\$463.25
2101-2250	\$855.00	\$976.50	\$247.50	\$490.50
2251-2400	\$902.50	\$1030.75	\$261.25	\$517.75
2401-2550	\$950.00	\$1085.00	\$275.00	\$545.00
2551-2700	\$997.50	\$1139.25	\$288.75	\$572.25
2701-2850	\$1045.00	\$1193.50	\$302.50	\$599.50
2851 AND OVER	Call for Fee	Call for Fee	Call for Fee	Call for Fee

Multiple Location Fees - \$85.00 for each additional food booth/stand/tent at the same event.

Number of Additional Locations _____ X \$85.00 = _____ (Additional Location Fee)

Fee for Largest Booth/Tent from Chart _____

Additional Location Fee + _____

TOTAL LICENSE FEE = _____