

#### **Town of New Canaan**

Health Department
77 Main Street, New Canaan, Connecticut 06840
Phone: 203-594-3035 Fax: 203-594-3121

# Health Department Requirements

### For Temporary Events

All caterers who are planning on providing their services will need to complete the following documents and submit them to the New Canaan Health Department for review no later than 2 weeks prior to the scheduled event.

**Failure** to get these documents to the health department on time **will incur** an additional **\$50 late fee** and may result in cancellation of your event.

Completed applications which <u>must include all items on the list</u> below may be dropped off (77 Main Street – lower level), or emailed (<u>chris.wegrzyn@newcanaanct.gov</u> or <u>debra.katz@newcanaanct.gov</u>).

- Completed temporary food event application.
- Copy of qualified food operator license with matching photo id.
- Commercial kitchen license.
- Copy of menu.
- \$75 fee, check made out to Town of New Canaan.



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Department of Health
77 Main Street, New Canaan, CT 06840
Phone: (203) 594 – 3035 Fax: (203) 594 – 3125
www.newcanaan.info/health\_dept\_main.html

#### **Temporary Food Permit Application**

Applicant Name (Please type or print clearly)  Applicant Mailing Address  Person in Charge of Booth  Event Name			Applicant phone # Email Address		Cell #			
						Organization/Business Name  Event Location		
			Event Coordinator					
			Event Date		Event Hours			
#	Food/Beverage Items	Where Purchased	Off-site Prep**	Hot Holding?	Cold Holding?			
**If off-s SERVED	ite preparation is selected, your at events open to the public	ou must use an approved (	permitted) kitchen fac	ility. Home prepared	food CANNOT BE			
Name of	Permitted Kitchen	Add	ress of Kitchen		Phone #			