## Appendix IV - Application for Sale of Higher Risk Food at Temporary Food Markets

| Application Date: ______________________ | Applicant: ____________________________ |
| Mailing Address: ________________________ | City/Postal Code ________________________ |
| Phone (Day): ___________________________ | Phone (Cell): __________________________ |
| Fax #: _________________________________ | E-mail: ________________________________ |
| Applicant’s Signature: ____________________ |

Name of Market / Event: ______________________ Date(s) of Event: ______________________

Location of Market / Event: ______________________ Business Hours: _________ to _________

**NOTE:** If selling at multiple markets - list all locations on separate page.

Market Manager: ___________________________ Phone #: ___________________________

Provide a complete list of your food products. List additional foods on separate page if more space needed

<table>
<thead>
<tr>
<th>Product 1</th>
<th>Product 2</th>
<th>Product 3</th>
</tr>
</thead>
</table>
|...

Describe your packaging method by checking the applicable boxes as noted below.

- [ ] Plastic Wrap  
- [ ] Bottle  
- [ ] Pouch  
- [ ] Vacu-packed  
- [ ] Other ________________________

Have you previously received a Letter of Acceptance or Confirmation for the foods intended to be sold:

- [ ] No  
- [ ] Yes  

*If yes, please provide a copy of the letter(s) with your application.*

For **EACH** food product intended to be sold at the temporary market, please include the following documents with your application form:

- [ ] a list of ingredients  
- [ ] a brief description of the preparation and preservation method  
- [ ] a sample of your product label  
- [ ] for each food item, indicate location of processing/packaging (e.g. commercial establishment including address)  
- [ ] If you have done quality assurance testing of your products, please provide a copy of your most recent lab reports where applied:  
  - [ ] Bacteriology  
  - [ ] pH  
  - [ ] £ Aw

**APPLICATION FORM IS DUE AT LEAST 30 DAYS PRIOR TO THE EVENT AND SENT TO YOUR LOCAL HEALTH AUTHORITY**

**NOTE** – Applicants should plan for a 14-day processing turnaround time.