



City and County of San Francisco
DEPARTMENT OF PUBLIC HEALTH
ENVIRONMENTAL HEALTH BRANCH

London N. Breed, Mayor
 Grant Colfax, MD, Director of Health

Patrick Fosdahl, MS, REHS
 Director of Environmental Health

ANNUAL TEMPORARY EVENT PERMIT APPLICATION FOR FOOD VENDORS

Date: _____

Applicant Name: _____

Applicant Email: _____

Applicant Phone Number: _____

Doing Business As: _____

Business Account Number (BAN) and LIN number (as issued by the SF Tax Collector's Office)

BAN: _____ LIN: _____

Are you claiming a Veteran's Exemption? Yes No

Are you serving pre-packaged food products only? Yes No

Are you serving beverages only? Yes No

Are you providing samples of your food or beverages? Yes NO

Are you cooking and/or preparing food onsite? Yes No

 Signature