



Prevent. Promote. Protect.

CAPE GIRARDEAU COUNTY PUBLIC HEALTH CENTER
Environmental Services
P.O. Box 1839
Cape Girardeau, MO 63702-1839
www.capecountyhealth.com

Phone (573) 335-7846 Fax (573) 334-6572

FOOD VENDOR FORM

Please complete form and submit at least one week prior
to event by Fax to (573) 334-6572 or E-mail to
amy.morris@capecountyhealth.com

Name of Event: _____ Date(s) of event: _____

Location: _____

Set-up time: _____ Event operation hours: _____

Name of Food Stand: _____

Food Stand Operator: _____

Address: _____

Phone: _____

What foods will you sell at this event?

Will electricity be provided for the food booths? Yes No

If yes what is the source? Public Utility Private/ Generators

Will equipment/utensil washing facilities be provided for food booth operators? Yes No

If yes please describe:

Describe hand washing facilities:



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Describe water supply:

Describe waste water disposal:

Describe garbage disposal (including frequency of pick up): _____

Will the booth(s) be located on a non-absorbent surface? Yes No

If no please describe:

Print Your Name

Date