

**\*Alabama Department of Public Health  
Application  
For Exemption For Food Service at a Temporary Event**

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Name of Event:   Exempt

Event Location:

Event Type:  Type Facility

Event Sponsored by:

Check all that are Applicable:

- Political Subdivision of this State
- Agency or Organization that is Exempt from Taxes
- Agency or Organization that is Exempt from Business License Requirements

Contact Person:  Contact Phone:

Position in Agency or Organization

Mailing Address:  City:  State:  Zip:

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**EARLIEST initial food preparations will begin:**

**LATEST final clean-up and removal from site:**

Date:  Time:

Date:  Time:

**EXEMPTION**

NOTE: An exemption CAN NOT be issued to sell or otherwise use low acid foods that have been canned at home!  
Examples include home canned vegetables or home canned meats.

**\*Application shall be submitted at least 5 calendar days prior to the date of the event**

List the name, address, contact information, and list the menu (or attach a menu) for each food vendor for this sponsored event. Use a separate sheet if additional space is needed.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Applicant

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