

Send application to the county where event will be held: Accomack County Health Dept. P.O. Box 177 Accomac, VA 23301 757-787-5886

Fax 757-787-5841

Northampton County Health Dept. P.O. Box 248 Nassawadox, VA 23413 757-442-6228 Fax 757-442-4307

\* \$40.00 per year

\*No charge for non profit agency

\*No charge for once a year operations if event is in your home locality

## **Application for Temporary Event Permit**

Facility/Organization Name:		Date:	Date:	
Mailing Address:				
Name of person in charge during event:				
Event and Event Location:		Cell Phone:		
		Hours of Operation:		
Please provide the following processing of your application	information. Failure to provide n.	the necessary information regarding you	r operation may delay the	
Source of Water (bottled, public):		Sewage Disposal Method:		
Trash Disposal Method:		Liquid Waste Disposal:		
		AND BEVERAGE ITEMS BELOV		
FOOD/BEVERAGE ITEMS	SOURCE	WHERE PREPARED	METHODS OF PREPARATION	
Example: Hot Dogs	Supermarket	Joe's Restaurant  or On Site	Boiled in large pot on gas grill	
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Chapter Certion 3		notes assistant of the second	oly may result in a poweit.	
			Signature	