

Application for Exempt Temporary Event

G.S. 130-250 (7) Allows establishments that are incorporated as nonprofit corporations in accordance with Chapter 55 of the General Statutes or are exempt from federal income tax under the Internal Revenue Code as defined in G.S. 105-228.90 or that are political committees as defined in G.S. 163-278.6(14) to prepare or serve food and/or drink for pay no more than once a month for a period of two consecutive days. Even though your event may be exempted from being regulated you should use "best practice" during an event to ensure the safety of your patrons.

Are You:

- a) incorporated as a nonprofit corporation in accordance with chapter 55A of the North Carolina General Statutes or,
- b) exempt from federal income tax under the Internal Revenue Service as defined in General Statute 105-228.90 (have 501 (c) (3) status) or,
- c) a political committee as defined in General Statute 163-278.6 (14).

YES A permit will not be required for your operation. A facility meeting one of the above conditions may sell food without a permit, but is limited to selling no more than two consecutive days, one time per month.

The department will require written proof of the organization's tax-exempt status, (either a federally issued 501(c) (3) document or state issued tax-exempt status) or a letter from a nationally recognized political party's candidate written on official letterhead. There are restrictions that apply if the organization hires someone to prepare, cook, and/or serve food.

Nutrition for the Elderly programs also qualify to sell food without a permit, but are limited to one day per month.

Facilities where only items such as: popcorn, funnel cakes, candy, fried apple pies, cotton candy, soft pretzels or dip ice cream do not require a permit.

NO A permit will be required for your operation. Stop – this application does not apply. Applicant must complete the **TEMPORARY FOOD SERVICE PERMIT APPLICATION FOR VENDORS**.

Event Information (Please Print)

1. Event: _____

2. Location of event: _____

3. Dates/times of operation: Begin date: _____ Begin time: _____
End date: _____ End time: _____

4. Your organization/business name: _____

5. Applicant's name: _____

6. Applicant's address: _____
Address City State Zip

7. Applicant's telephone: (8am-5pm) _____ (Night/Other) _____

8. Applicant's E-mail Address: _____

Signature: _____

Date: _____