



County of San Diego
DEPARTMENT OF ENVIRONMENTAL HEALTH
FOOD AND HOUSING DIVISION
 P.O. BOX 129261, SAN DIEGO, CA 92112-9261
 (858) 505-6900 FAX (858) 505-6998



Declaration of For-Profit Food Vendor

This declaration is to affirm that _____
 (Name of for-profit food vendor)

 (Health Permit Number)

is requesting exemption from the State Law requirement for Community Event Food Vendors under provision of Section 113789 (c)(4) of the California Health and Safety Code, and will be giving or selling food at:

 (Name of Event)

 (Address or Location)

 (City, Zip)

Date(s) of Event: _____

For the Benefit of _____
 (Name of Sponsoring Non-Profit Association)

I certify that the above is true and correct to the best of my knowledge and belief. I further certify under penalty of perjury that the above named for-profit food vendor **will receive no monetary benefit** other than that resulting from recognition from participating in the event.

Name: _____ Phone: (____) _____
 (Please Print)

Address: _____

City: _____ Zip: _____

Email: _____

 (Signature) Date: _____

Title: _____