GRANT COUNTY HEALTH DISTRICT

Intermittent Food Establishment

Annual Event List

Please complete the following schedule for 2019 and return prior to operating by mail (1038 West Ivy, Moses Lake, WA 98837), Fax (509-766-6519) or email to foodsaftey@granthealth.org

NAME OF FOOD ESTABLISHMENT_____

OPERATION LOCATION/ADDRESS_____

PERSON IN CHARGE OF FOOD SERVICE_____PHONE_____

EVENT INFORMATION: (Additional space on back) - **Notify GCHD if additional events are added at a later date**

DATE(S) OF EVENT	NAME & LOCATION OF EVENT	GENERAL OPERATION TIME(S)

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