



COMMUNITY DEVELOPMENT,  
LICENSING  
14600 MINNETONKA BLVD  
MINNETONKA, MN 55345

Phone: 952/939-8274  
Fax: 952/939-8244  
Email: [vnorthway@eminnetonka.com](mailto:vnorthway@eminnetonka.com)

TO: [APPLICANT FOR A SPECIAL EVENT/ITINERANT FOOD LICENSE](#)  
(Definition: a food establishment building, room, stand, enclosure, vehicle, space, area, or other place that is operating for a temporary period of 14 consecutive days or less).

FROM: [VALERIE NORTHWAY, LICENSING COORDINATOR](#)

Attached are the license application forms for your special event/itinerant food license. Also attached are two sections (handouts) that list the requirements/standards for a special event/itinerant food stand in the City of Minnetonka:

The application forms you will need are the following:

1. [Minnetonka Application form](#)
2. [Minnetonka Event & Food Item Information form](#)
3. [Minnesota Business Tax Identification form](#)  
(Minnesota state law defines the applicant as a company officer – not the corporation, LLC, etc.)
4. [Minnesota Workers' Compensation Insurance form](#)
5. For license fee, follow this line to the [Food License Fee Schedule](#) for the current year – look under **Itinerant Food Establishment**. Make checks payable to “City of Minnetonka”.

**Complete the forms (#1-4). Mail the completed forms together with the fee (#5) to the address shown above.**

The application will be processed within seven days. The Environmental Health staff will contact you if they have any questions. Typically, the license is delivered to you at the inspection of the event/stand at the time and the date that you applied for to be open.

The handouts included with this packet:

1. [Standards For Special Event/Itinerant Food Stands](#)
2. [Equipment Checklist for Special Event/Itinerant Food Stands](#)

If you have questions regarding the requirements of setting up for food sales, call Environmental Health at 952-939-8272. If you have any question about the licensing procedure or approval status, call Val Northway, Licensing, at 952-939-8274.



# Application for a Special Event/Itinerant Food License

(insert year) \_\_\_\_\_

Please enter a response on every line. Any incorrect information or an incomplete application is a violation of the City Ordinance and can result in denial of licensing and/or prosecution.

**LICENSEE INFORMATION –**

**State Law: this must be a corporation, partnership, or proprietor name, etc. that carries the income tax liability.**

Company name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Name of person responsible: \_\_\_\_\_  
 Weekday/daytime phone # of person responsible: (     ) \_\_\_\_\_

**EVENT LOCATION/INFORMATION**

Name of the business/building site where event will be held: \_\_\_\_\_  
 Address of this building: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Name of the person who gave you permission to be at this site (Owner's representative): \_\_\_\_\_  
 Weekday/daytime phone # of the building owner or representative: (     ) \_\_\_\_\_

**PAYMENT INFORMATION –Fee (from attached [Food License Fee Schedule](#)) – payable to City of Minnetonka**

Date(s) event will be held: _____	Total number of days for this event : _____
1 <sup>st</sup> day fee (& minimum): _____	_____
2 <sup>nd</sup> day, add an additional fee: _____	_____
3 <sup>rd</sup> day, add an additional fee: _____	_____
4 <sup>th</sup> day, add an additional fee: _____	_____
*5 <sup>th</sup> day through-end-of-event, add an additional fee: _____	_____

\*REMINDER – do not pay more than the maximum fee (equal to 5 days fee) as stated on the attached [Food License Fee Schedule](#) – for an Itinerant Food Establishment

TOTAL FEE\*: \$ \_\_\_\_\_

Note: Proper signature required: if a corporation is the licensee, an officer of the corporation must sign below; if a partnership, one of the partners; if an individual, the owner.

I, (WE) THE UNDERSIGNED, HAVE COMPLIED WITH ALL REQUIREMENTS OF THE CITY CODE OF THE CITY OF MINNETONKA NECESSARY FOR OBTAINING THIS LICENSE. NOW, THEREFORE, I (WE) HEREBY MAKE APPLICATION TO OPERATE THE ABOVE NAMED ESTABLISHMENT SUBJECT TO ALL CONDITIONS AND PROVISIONS OF THESE ORDINANCES.

Signature	Date	Print name: _____
		Print title: _____

# EVENT & FOOD ITEM INFORMATION FORM SPECIAL EVENT/ITINERANT ESTABLISHMENT

Please enter a response on every line. Any incorrect information or an incomplete application is a violation of the City Ordinance and can result in denial of licensing and/or prosecution.

Some of this information is repeated from the application page – you must complete this page also.

## LICENSEE INFORMATION

The following section requests information about the corporation/partnership (or yourself, if sole proprietor):

Company name: \_\_\_\_\_  
Person responsible: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone numbers:  
Daytime ( ) \_\_\_\_\_ Evening ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

## EVENT INFORMATION/LOCATION

The following section requests information all about the event.

Title/Name of the event: \_\_\_\_\_  
Date(s) of the event: \_\_\_\_\_  
The time of the event: \_\_\_\_\_  
Location of the event = Building name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone number for the business/building where event will be held: ( ) \_\_\_\_\_  
Describe your location within the building or at the site: \_\_\_\_\_

## CONTACT NAMES

The following section requests information about the person/staff who will be on the site and at the event:

Name & title of person(s) in charge of (at at the) event: \_\_\_\_\_  
Phone numbers:  
Daytime ( ) \_\_\_\_\_ Evening ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

## FOOD OPERATION:

The following section requests information about your proposed food at this event:

List all menu items: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
How will hot foods be maintained? \_\_\_\_\_  
How will cold foods be maintained? \_\_\_\_\_  
Where and when will foods be prepared? \_\_\_\_\_  
\_\_\_\_\_  
How will foods be stored overnight (both the location and facility)? \_\_\_\_\_  
\_\_\_\_\_  
What vehicle or process will be used to transport food? \_\_\_\_\_

\_\_\_\_\_  
Signature of Licensee/Applicant

\_\_\_\_\_  
Print both name and title

# MINNESOTA BUSINESS TAX IDENTIFICATION LAW

Pursuant to Minnesota Statute 270C.72 (Tax Clearance; Issuance of Licenses), Subd.4, the licensing authority is required to provide, upon request of the Minnesota Commissioner of Revenue, either the applicant's Minnesota business tax identification number with the business name and address – or the social security number of the primary officer, along with their complete name, home address, and home phone number.

Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of this information:

1. This information may be used to deny the issuance or renewal of your license in the event you owe Minnesota sales, employer's withholding, or motor vehicle excise taxes.
2. Upon receiving this information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement, the Department of Revenue may supply this information to the Internal Revenue Service.
3. Failure to supply this information may jeopardize or delay the processing of your license issuance or renewal application.

<b>NAME UNDER WHICH THE MN TAX ID IS FILED (<u>licensee</u> name)</b>				<b>Type of license applying for:</b>	
<b>Licensee: Address</b>		<b>L City</b>	<b>L State</b>	<b>L Zip</b>	<b>L Phone</b>
<b>Establishment: Name</b>				<b>Minnetonka License Number (completed by Minnetonka)</b>	
<b>Establishment: Address</b>		<b>E City</b>	<b>E State</b>	<b>E Zip</b>	<b>E Phone</b>
<b>Minnesota Tax Identification Number</b>			<b>Federal Tax Identification Number</b>		

Be sure to sign and date at bottom of form.

**INSTRUCTIONS FOR BOXES BELOW:**

1. **If all boxes above are completed, including both the Minnesota and Federal Tax numbers, no additional information is required by the MN Department of Revenue below.**
2. **However, if all boxes above are not completed, Minnesota law requires personal information about the primary owner or primary officer. In this case you must complete all boxes below, including the owner or primary officer's social security number, home address, and home phone. (NOTE: If the business and home address are the same, please check the box indicating this.)**

<b>Applicant's (person's) name (LAST, first, middle initial)</b>		<b>Social Security Number</b>	
<b>Home address</b>		<b>Home City, State, Zip code</b>	<b>Home Phone number</b>
<input type="checkbox"/> <b>Check if address is for both home &amp; business</b>			

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Certificate of Compliance Minnesota Workers' Compensation Law

**PRINT IN INK or TYPE.**

Minnesota Statutes, Section 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business or engage in any activity in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of Minnesota Statutes, Chapter 176. The required workers' compensation insurance information is the name of the insurance company, the policy number, and the dates of coverage, or the permit to self-insure. If the required information is not provided or is falsely stated, it shall result in a \$2,000 penalty assessed against the applicant by the commissioner of the Department of Labor and Industry.

**A valid workers' compensation policy must be kept in effect at all times by employers as required by law.**

BUSINESS NAME (Individual name only if no company name used)	LICENSE OR PERMIT NO (if applicable)
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DBA (doing business as name – local establishment name – only if different than above)

DBA/LOCAL BUSINESS ADDRESS (PO Box must include street address)	CITY	STATE	ZIP CODE
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**YOUR LICENSE OR CERTIFICATE WILL NOT BE ISSUED WITHOUT THE FOLLOWING INFORMATION.  
You must complete number 1, 2 or 3 below.**

**NUMBER 1 COMPLETE THIS PORTION IF YOU ARE INSURED:**

INSURANCE COMPANY NAME (not the insurance agent)

WORKERS' COMPENSATION INSURANCE POLICY NO.	EFFECTIVE DATE	EXPIRATION DATE
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**NUMBER 2 COMPLETE THIS PORTION IF YOU ARE SELF-INSURED:**

I have attached a copy of the permit to self-insure.

**NUMBER 3 COMPLETE THIS PORTION IF YOU ARE EXEMPT:**

I am not required to have workers' compensation insurance coverage because:

- I have no employees.
- I have employees but they are not covered by the workers' compensation law. (See Minn. Stat. § 176.041 for a list of excluded employees.) Explain why your employees are not covered: \_\_\_\_\_.
- Other: \_\_\_\_\_

**ALL APPLICANTS COMPLETE THIS PORTION:**

**I certify that the information provided on this form is accurate and complete. If I am signing on behalf of a business, I certify that I am authorized to sign on behalf of the business.**

APPLICANT SIGNATURE (mandatory)	TITLE	DATE
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**NOTE: If your Workers' Compensation policy is cancelled within the license or permit period, you must notify the agency who issued the license or permit by resubmitting this form.**

This material can be made available in different forms, such as large print, Braille or on a tape. To request, call 1-800-342-5354 (DIAL-DLI) Voice or TDD (651) 297-4198.

# STANDARDS FOR SPECIAL EVENT FOOD STANDS

A "Special Event Food Stand" is a food establishment that is used in conjunction with celebrations or special events. The length of the operation for a special event food stands is no more than 3 times annually for no more than 10 total days (which- ever comes first). *Please submit special event food stand applications at least 14 working days prior to the event for review and processing.* Questions can be directed to the Environmental Health Division at 952- 939-8200.

## LOCATION

The stands must be located away from possible contamination sources such as toilets, animal pens and garbage. The stand must provide protection during adverse weather by its construction or location. Food activities must cease in adverse weather if the interior of the stand is not adequately protected from windblown dust and debris.

## CONSTRUCTION AND EQUIPMENT

1. A canopy or other form of overhead protection.
2. The floor, wall and ceiling surfaces must be smooth, durable and easily cleanable. Acceptable floor surfaces include: vinyl, sealed wood, concrete, machine-laid asphalt, and dirt or gravel (only if covered by suitable materials that are effective in controlling dust and mud).
3. Interior lights must be shielded or coated.
4. Adequate mechanical refrigeration must be provided for potentially hazardous food products containing meat, fish, poultry, milk, eggs, melons, tomatoes, cooked potatoes, and other items capable of supporting the growth of bacteria. The use of insulated chests containing dry ice or frozen refrigerant packs may be approved for hot dogs and precooked sausages.
5. Thermometers must be provided in each refrigeration unit, insulated chest and for monitoring internal food temperatures.
6. Equipment must be provided for adequately cooking and maintaining required temperatures of hot potentially hazardous foods. Crock-pots may not be used. Note: Gas hook-up and service must comply with Minnesota Statutes, Chapter 1346. Check with the fire department.
7. Utensils such as galvanized or soft plastic containers, wooden spoons, enamelware, paintbrushes, etc. are not acceptable for use. Garbage bags and garbage receptacles are not to be used for covering or storing food.
8. To prevent customers from being burned and/or splashed with grease and to prevent possible contamination by customers, food preparation and cooking areas must be protected by means of an impervious shield or separation distances. Adequate separation distances can be provided by locating cooking equipment to the rear of the stand.
9. A fire extinguisher with a minimum 2A 10 B C rating must be present when required by the fire department.
10. Electrical service must comply with Minnesota Statutes, Chapter 1315.
11. Carbon dioxide and bottled gas cylinders must be secured.

## WATER SOURCE

Water must be obtained from an approved public water supply system. Water cannot come from a residential well. Water may be transported and stored in approved cleanable, food-grade covered containers. Hoses used to obtain water must be of food grade quality and provided with an approved backflow prevention device.

## WASTE DISPOSAL

1. Wastewater must be discharged to an approved sanitary sewer system or a holding tank. Ground surface discharge is not permitted.
2. Trash and garbage that is stored for extended periods must be placed in tightly covered, non-absorbent containers.

## INSECT CONTROL

Provide effective insect control by the use of screening, covering and good sanitation. If insecticides are used they must be approved; used according to manufacturer's directions; and not used when food or utensils are exposed. Intermittent spray dispensers or vapor strips cannot be used.

## HANDWASHING FACILITIES

A handwashing device supplied with warm running water, soap, paper towels and a nail brush must be provided at all stands where food is prepared. Water must be supplied under pressure or by gravity with a faucet. A bucket must be provided for waste water.



## SANITIZING SOLUTION

Approved sanitizers include quaternary ammonium, iodine, or chlorine bleach. Always follow the manufacturer's instructions and provide test strips for measuring sanitizer concentration. A spray bottle with paper towels or a bucket with a towel must be provided to wipe surfaces and equipment. The most common sanitizer consists of one tablespoon of chlorine bleach to a gallon of water. The concentration must be 50-200ppm of chlorine.



## HANDLING AND STORAGE

1. All ice and food supplies must come from an approved commercial source. ***Food or supplies may not be stored or prepared at home!*** Food preparation activities must take place in an approved and licensed kitchen (Church, school, and fraternity kitchens may be considered acceptable).
2. Ice must be from a commercial source.
3. Milk and other potentially hazardous beverages may not be chilled in ice. Canned/ bottled non-potentially hazardous beverages may be chilled in ice but not buried in ice. The drinking side must be stored up. The ice container must have a mechanism to allow continuous drainage of the ice.
4. All potentially hazardous food must be processed and maintained at proper temperatures as indicated:
  - Cold foods must be kept at 41° F or below.

- Foods that require cooking must reach proper internal temperatures as indicated:

Beef Roasts	130° F
Beef, Veal, Ham Products	150° F
Ground Hamburger	155° F
Poultry Products (i.e., turkey, chicken)	165° F

- After heating, foods must be held at 140° F or above (except first-time cooked beef roasts- 130° F).
- All foods that are reheated must reach an internal temperature of at least 165° F.

*Any foods left over at end of the day must be discarded.*

*Use a sanitized stem thermometer to check temperatures.*



5. Food and supplies such as paper plates and plastic eating utensils must be clean, dry, covered, and kept at least 6 inches off the floor/ground.
6. Single service utensils and self-service food including condiments (catsup, coffee creamers, sugar, etc.) must be individually packaged or be dispensed from an enclosed dispenser.

#### DISHWASHING FACILITIES, PROCEDURES, AND EQUIPMENT CLEANING

1. Single service disposable utensils must be provided for eating and drinking purposes. Multi-use utensils may be used for the purpose of preparation, storage, service and dispensing of food. For washing multi-use utensils, a dishwashing facility must be available which consists of either an approved dishwashing machine, a three compartment sink, or at a minimum, three containers of sufficient size to immerse utensils.
2. The four step manual dishwashing process includes:
  - a) Wash in warm, soapy water in first sink or container
  - b) Rinse in clear water in second sink or container
  - c) Sanitize in the third sink or container with an approved sanitizer.
  - d) Air drying all utensils and equipment. Towel drying is prohibited.



3. Utensils are to be washed and sanitized immediately prior to the special event and as often as necessary during the event. As an alternative, utensils may be washed off-site if approval is granted. When this is done, the utensils must be suitably covered when transported to the event (e.g., plastic wrap or container). Enough utensils are to be provided so that if one becomes contaminated, a clean one is available.
4. Food contact equipment that must be cleaned in place (e.g., meat slicer, soft serve ice milk dispenser) must be washed and then sanitized using a solution listed previously.
5. Cloths used to wipe equipment and counters must be stored in a sanitizing solution between uses (equal to sanitizer solution listed previously). The sanitizer must be prepared and available at the beginning and throughout operation.

#### PERSONNEL

1. Employees must wash their hands before beginning work, immediately after going to the bathroom, handling raw food, smoking, and after touching the mouth, nose, face, or otherwise soiling their hands.
2. No employee that has a communicable disease, gastrointestinal illness, or discharging wound may engage in food preparation or service activities.
3. The use of tobacco in any form while on duty is prohibited.
4. An employee's outer garments must be clean.
5. Effective hair restraints (hairnets, visors, caps, and similar) must be worn.
6. Provide gloves, utensils or other barrier for handling all ready-to-eat foods.

## EQUIPMENT CHECKLIST FOR SPECIAL EVENT FOOD STANDS

This checklist was developed as a guide to aid in the opening and operation of a special event food stand. The goal of any food operation is to maintain a high level of sanitation and to protect the public from disease transmission and injury. We hope this checklist will be a useful tool in the self-inspection of your food stand. Please call the Environmental Health Division at 952-939-8200 if you have any questions.

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### Construction

- \_\_\_ Overhead Protection (tent, canopy, building)
- \_\_\_ Approved floor (concrete, wood or similar cleanable material)
- \_\_\_ All sealed surfaces (laminated, stainless, no bare wood)
- \_\_\_ Shatter resistant lights or shields

### Hand washing Facilities

- \_\_\_ Pump soap
- \_\_\_ Paper towels and holder
- \_\_\_ Fingernail brush
- \_\_\_ Warm water faucet or spigot (air-pot, water cooler)
- \_\_\_ Bucket for waste water

### Personnel

- \_\_\_ Hair restraints (hats, hairnets)
- \_\_\_ Clean clothes and aprons. Bring extras to change throughout day!
- \_\_\_ Food handling/training information

### Sanitizing Solution

- \_\_\_ Bleach or other approved sanitizer
- \_\_\_ Spray bottle and/or bucket for sanitizing solution
- \_\_\_ Test strips
- \_\_\_ Paper towels or cloth towels for sanitizing solution

### Equipment

- \_\_\_ Refrigeration (mechanical) for potentially hazardous foods
- \_\_\_ A metal stem thermometer to measure temps. (range 0°F to 220°F)
- \_\_\_ A thermometer in each refrigeration and hot holding unit
- \_\_\_ Adequate number of approved, clean utensils, pans and equipment. Bring extras!
- \_\_\_ Adequate shields and/or separation between food and customers
- \_\_\_ Shelves, dunnage racks for keeping all food and supplies off the floor/ground
- \_\_\_ Cutting boards, stainless steel tables, other approved food contact surfaces if necessary

### Miscellaneous

- \_\_\_ Fire extinguisher when grilling
- \_\_\_ Electrical cords- Heavy duty (such as No. 14 gauge), grounded
- \_\_\_ No "homemade" food or equipment!
- \_\_\_ Rubber rugs, or similar
- \_\_\_ Trash container with cover
- \_\_\_ Chains or restraints for carbon dioxide and/or helium cylinders
- \_\_\_ Permanent marking pen for labeling