



Food Permit Exemption Form

Email Application to: eh@carsoncity.gov
Permits and Fees are NON-Transferrable and NON-Refundable
 Carson City Health and Human Services Environmental Health Division
 900 E Long St Carson City, NV 89706
 Phone: 775-887-2190 ext. 80029 Gethealthycarsoncity.org



Food Establishment Type

Food Establishment Exemption from Regulation

Temporary Event Permit Exemption

Applicant Information

Business Name (if applicable):

Name:

Address:

Phone:

Email Address:

Temporary Event

Not Applicable

Event Name:

Event Dates:

Food

List all sources of food: Please include the name of the supplier for each item of product sold.

Food/Beverage Product Name:

Source:

Statement and Signature

I, _____ (PRINT) am applying for an exemption from a food establishment health permit. This exemption is from the requirement for a health permit pursuant to NRS 446, and has the following conditions:

- I agree to comply with the regulation that prohibits products from being stored or displayed on the ground.
- I agree to comply with the regulation that prohibits the slicing or breaching of whole food products in any way.
- I agree to obtain approval from Carson City Environmental Health prior to any changes to food or beverage items sold.

Signature(s): _____

Date: ____ / ____ / ____

DO NOT WRITE BELOW-FOR OFFICIAL HEALTH DISTRICT USE ONLY

Signature (Environmental Health Specialist)

Printed Name

____ / ____ / ____
Date