



TOWN OF FREMONT
Building Inspector/Code Enforcement
PO Box 120
Fremont NH 03044-0120

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BuildingInspector@fremont.nh.gov

Temporary Food Permit Application

Name of Business_____

Name of Applicant_____

Address_____

City_____ State_____ Zip Code_____

Email Address_____

Name of Event_____

Event Address_____

Date/Time of Event_____

List All Food/Beverages To Be Served:

Office Use Only:

Permit Fee \$25.00 Paid _____ **Date** _____ **Ck#/Cash** _____