

## Chandler Fire Department FOOD/BEVERAGE VENDOR APPLICATION

Please retain a copy for your records

<u>Vendor Information</u>							
Owner's Name:							
Owner's Phone Number:							
Owner's Email Address:							
Business Name:							
Event Attending, if applicable:							
Annual Fire Department Inspection							
<ul> <li>An annual fire inspection is required for a</li> <li>Last Fire Dept. Inspection Date:</li> <li>Attach Fire Dept. Inspection Report</li> <li>To schedule a fire inspection, please email fire</li> </ul>			_		-		
<b>Description of Cooking Operation</b>							
Cooking in a Trailer/Mobile Van/Food Truc  License Plate #	: <b>k</b> State:		☐ Yes		No	If yes, inspection required by Fire Do	₽pt.
<ul> <li>Cooking operations next to a canopy/tent</li> <li>Attach Photos of Fire Extinguishers &amp; Co</li> </ul>			☐ Yes		No		
Cooking on/in Grill, Griddle, Deep Fryer, St	tove, Kettle Corn		☐ Yes		No		
Any other Open Flame used			☐ Yes		No		
Sales of Food/Drink items Only			☐ Yes		No		
Fire Suppression System							
Kitchen Suppression System Service Date: Hood Cleaning Date:							
Fire Extinguishers							
		□No				ate:	
Dry Chemical 2A10BC (minimum) ☐Yes ☐No		□No		Service Date:			
<u>Fuel</u>							
Combined LP Gas Cylinders DOES NOT exceed 200 lbs.				□Y	es	□ No	
LP Gas Alarm (LP Gas systems only)				□Y	es	□ No	
LP Gas System shall be inspected annually	<i>'</i> .			Serv	vice D	ate:	
CNG Methane Alarm (CNG Fuel systems only)				□Y	es	□ No	
CNG Fuel System shall be inspected every	3 years.			Serv	vice D	ate:	

Mailing Address P.O. Box 4008, MS 801 Chandler, AZ 85244-4008 Chandler Fire Department 151 E. Boston St. Chandler, AZ 85225 fire.prevention@chandleraz.gov

chandleraz.gov/fire

Fax: 480-782-2125 FD Form No.: 700 Revised: 7/18/2023

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