

**Notification of Intent to Operate a
Special Transitory Food Unit (STFU)
within LAPEER COUNTY**

Must be received four (4) days prior to event.

Name of Business: _____ Phone _____
Number

Business Address: _____

Name of Operator: _____

Name of STFU Unit: _____ License _____
Number

Name of Event: _____

Operation: Start Date: _____ End Date: _____
Hours of Operation: _____

Location of Operation: (Be specific)

Operation Site: _____

Address: _____ City: _____ County: _____

Phone number of operator during the event: _____

Name of the Local Health Department or
MDA Regional Office where the STFU is Licensed: _____

Are you requesting a paid inspection? *Yes _____ No _____ LCHD fax (810) 667-0283

*If yes, mail this request with payment to LAPEER COUNTY HEALTH DEPT. 1800 Imlay City Rd.
Lapeer, MI 48446. Staff will not take payment in the field.

Michigan's Food Law States That a STFU License Holder Shall:

- Before serving food within the jurisdiction of a local health department, notify the local health department in writing (use the form provided above) of each location in the jurisdiction at which food will be served and the dates and hours of service. The license holder shall mail the notice by first-class mail or deliver the notice not less than 4 business days before any food is served or prepared for serving within the jurisdiction of the local health department.
- While in operation, request and receive 2 inspections per licensing year. A local health department and the department shall charge a fee of \$90.00 for such an inspection.
- Send a copy of all inspection reports to the regulatory authority that approved the license within 30 days after receipt.

FOR LOCAL HEALTH DEPARTMENT / MDA REGIONAL OFFICE USE:

Date of receipt of Notification _____