

- Health Permit (Utah County, UDAF, or both depending on your product)
- Provo Business License (Will need health permit to obtain business license)
- Business Plan (We offer assistance with writing one)

Please briefly describe your business:

Please write your ideal schedule for using the kitchen. We are open 24/7:

We only allow one business to use the kitchen at a time. Are you flexible in the times you request to use the kitchen? If not, please explain.

How many employees besides yourself will be using the kitchen?

Do you have any large storage needs?

IMPORTANT INFORMATION:

KITCHEN USE: Kitchen fees will be assessed on a sliding scale according to Federal Poverty Guidelines. Rental fee payment is due the 10th of each month. If payment is not made by this time, a fee of \$5.00 a day will be added to the payment total. CASFB reserves the right to terminate contract agreement at any time.

I understand this application does not guarantee acceptance into The Potluck. I attest that the information on this form is accurate to the best of my ability.

Signature: _____ Date: _____

Name Printed: _____

Return application and documentation to:

Jennifer Morgan, Community Action Services and Food Bank, 815 S. Freedom Blvd, Provo, UT 84601