NO FEE / NO PERMIT TFE APPLICATION
(Non-Profit NCGS Exempt, General Fundraiser Exempt, Non-Potentially Hazardous/Low Risk Exempt)

☐ NONPROFIT NCGS EXEMPT VENDOR

G.S. 130A-250(7) states establishments (i) that are incorporated as nonprofit corporations in accordance with Chapter 55A of the General Statutes or (ii) that are exempt from federal income tax under the Internal Revenue Code, as defined in G.S. 105-228.90 or (iii) that are political committees as defined in G.S. 163-278.6(14) and that prepare or serve food or drink for pay no more frequently than once a month for a period not to exceed two consecutive days, including establishments permitted pursuant to this Part when preparing or serving food or drink at a location other than the permitted locations.

Check the type of NCGS exemption that you are requesting: (submit supporting documentation)

_____Chapter 55A of the GS non profits.

_____Exempt From federal income tax under G.S. 105-228.90

_____Political Committees as defined in G.S. 163-278.6(1)

Non-Profit Name: ___________________________ Contact Information: ___________________________

Contractor/Vendor/Promoter: ___________________________ Contact #: ___________________________

Location of Fundraiser: ___________________________

Date/Time of Location: ___________________________

Menu (List all Items): ___________________________

I hereby certify that the information in this application is correct and I understand that any deviation without prior approval from the local Environmental Health Office may nullify this exemption.

Signature: ___________________________ Date: __________

Owner or Responsible Party
**GENERAL FUNDRAISER EVENTS EXEMPTION NOT COVERED UNDER GS:**

(No minimum donation price posting, request or suggestion is permitted*)

**Event Coordinator:** Morgan Budzinski  
**Event Name & Location:** 47th Annual Fall Festival, Brasstown NC  
**Event Dates:**  
Beginning: 10 / 7 / 2023  Time: 10 am  
Ending: 10 / 8 / 2023  Time: 5 pm

Vendor Name: ____________________________  Phone: ____________________________  
Address: ________________________________________________________________  
Menu: ____________________________________________________________________  
__________________________________________________________________________

I, ____________________________________, verify that I am participating in this event for the purpose of raising funds for_______________________________________________________ and all of the proceeds from the event will be contributed to the fundraiser. *I agree that no minimum donation amount will be advertised or set for food/drinks. Set donations will subject fundraiser to the rules and regulations governing food establishments and will require a food handling permit from the Cherokee County Health Department.

**Signature and Date:** _______________________________________________________

**NON-POTENTIALLY HAZARDOUS FOODS (LOW RISK/ TCS) EXEMPT VENDOR**

Ex: dip ice cream, popcorn, snow cones, funnel cakes, soft pretzels, pork rinds/skins, cotton candy, pre-packaged items like chips, peanuts, candy bars. Other foods may be included such as baked goods, which are under NCDA&CS (984 236 4850) and also may require a permit from that entity.

**EVENT INFORMATION:**

**Event Coordinator:** Morgan Budzinski  
**Event Name & Location:** 47th Annual Fall Festival, Brasstown NC  
**Event Dates:**  
Beginning: 10 / 7 / 2023  Time: 10 am  
Ending: 10 / 8 / 2023  Time: 5PM

**VENDOR INFORMATION:**

**Vendor Name:** ____________________________________________________________  
**Contact Info (Phone, Address):** ____________________________________________  
**Menu:** ___________________________________________________________________

**Signature and Date:** _______________________________________________________

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