



CASFB Kitchen
APPLICATION

The Potluck Kitchen is dedicated to offering entrepreneurs an avenue with which to become self-sufficient and economically stable. The Kitchen incubator will act as a stepping stone by providing low rental rates for low-income entrepreneurs, who would otherwise be unable to afford the high overhead cost of starting a new business.

Therefore, those entrepreneurs who meet the federal poverty guidelines of low/moderate income will be given priority in acceptance into The Potluck Kitchen. There will be limited space each month for those who don't meet the income requirements to use the community kitchen.

Please Print Clearly

Business Name: _____

Name: (First): _____ DOB: _____

Last Name: _____

Address: (Street) _____ (City) _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact Name: _____ Contact Number: _____

The Following items must be submitted with this preliminary application prior to receiving acceptance into The Potluck:

<input type="checkbox"/> Tax returns & Tax ID #	<input type="checkbox"/> Food Safety Manager certification	<input type="checkbox"/> Utah County Resident
<input type="checkbox"/> Liability Insurance (\$1,000,000 minimum)	<input type="checkbox"/> Health permit	<input type="checkbox"/> Provo Business License
<input type="checkbox"/> Business Plan (We offer assistance with writing one)	<input type="checkbox"/> Food handler's Permit (employees)	<input type="checkbox"/> Take the 4 Financial Learning classes

Liability insurance: Must have the Potluck listed as additional insured.

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Answer the following questions:

1. Briefly describe your business:

2. Write your ideal schedule for using the kitchen. We are open 24/7:

3. 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.

4. How many employees besides yourself will be using the kitchen?

5. Do you have any large storage needs? If so, please explain.



Important Information

Kitchen use: Kitchen fees will be assessed on a sliding scale according to the federal poverty guidelines. Rental fee payments is due the 10th of each month. If payment is not made by this time, a fee of **\$150.00** will be added to the payment total. CASFB reserves the right to terminate the 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.

Print Full Name: _____

Signature: _____

Date: _____

Return application and documentation to Kitchen Manager,
Community Action Service and Food Bank, 815 S . Freedom Blvd, Provo, UT 84601

