



REFERRAL SERVICE FACILITY APPLICATION

Donation for service requested.

Application/User#:

Date:

Facility Name:

Address:

County:

Owner/Manager:

Phone:

Fax:

Email:

Best Time/Means to Contact:

Alternate Contact:

Relationship:

Phone:

Email:

Best Time/Means to Contact:

Inspecting Agency & Number (Proof of Inspection at consultation):

Please explain type of agreement preferred (Rent/Barter/Share/Other):

Indicate how you prefer to be put in contact with candidate:

If Rental/Barter, provide rates (or equivalent, if known) per time increment for:
Kitchen/s:

Dry storage:

Cold storage (indicate fridge and/or freezer):

Special Equipment Use (if applicable):

Other:

Discount for large time increments or advanced purchase? If "yes", please indicate price/time/type structure:

Preferred Renter/Share Type/Activity:

Prohibited Renter/Share Type/Activity:

Indicate maximum number of people you will allow in your kitchen space at one time (i.e. a business owner plus employees, total number of church/school group including instructor/s, etc.):

If liability insurance required, indicate amount:

Kitchen/s Description (est. sq. ft.; equipment; prep tables/stations, oven type, grease trap/s, etc.):

Dry Storage Description:

Cold Storage Description:

Other Options for Tenant/s (Y/N):

Y/N To combine ordering of packaging/product to lower costs and meet minimum vendor requirements

Y/N To combine ordering/pick-up of locally produced product/ingredients to ease burden of burgeoning local food supply/distribution system

Y/N Advertising/product placement opportunities

Other/Comments:

The Kitchen also facilitates Community Outreach/Education Programs. Are you interested in:
Y/N Educational class hosting (e.g. cooking, nutrition, farm-to-table, canning)
Y/N Group cooking/canning hosting (e.g. church, organization, school)
Y/N Having an on-site garden
Y/N Participating in a waste audit to help you understand your waste streams & tipping fee reduction possibilities
Y/N Participating in a composting program
Y/N Participating in an energy audit to help you understand your energy use and potentially reduce your consumption
For those you answered "yes" to, would you like us to provide your preferred contact information to the appropriate NGO/s, UF researcher/s, local business/es to facilitate these programs?

Comments/Suggestions/Concerns:

Nota bene: Blue Oven Kitchens is providing a referral service only and is not responsible for tenants or prospective tenants, scheduling, etc. This service is conducted in good faith, however, and Blue Oven will not refer anyone it considers inappropriate.

KITCHEN STAFF ONLY PLEASE

Staff Name:
Date of Consultation:
Y/N Proof of Inspection
Notes: