



FREE COFFEE PROGRAM APPLICATION AND PERMIT

INSTRUCTIONS: COMPLETE REQUEST AND CERTIFICATION PORTION OF FORM AND SEND ALL COPIES TO DISTRICT MANAGER NOT MORE THAN 60 DAYS BUT AT LEAST 30 DAYS IN ADVANCE OF DATE(S) REQUESTED. (PLEASE PRINT)

REQU	JEST AND C	EKIIFICA	IION	
NAME OF ORGANIZATION MAKING REQUEST				DATE
ADDRESS, CITY, STATE AND ZIP				TELEPHONE
REST AREA LOCATION REQUESTED CH Name Highway	Next Decad	ATE AND TIME O	F REQUEST (Permits issued in 24 AT MM/DD/YY	hour increments up to 72 hours)
Mile Point		TO:	MM/DD/YY AT	AMPM
I CERTIFY THAT THE ORGANIZA THE INTERNAL REVENUE SERVIC (A copy of the determination letter for I FURTHER CERTIFY THAT THE CORGANIZATION AND WILL BE A	CE UNDER C or your organization CONDITIONS	ODE SECT that grants exe OUTLINE	rion mpt status must be provided u	ipon request.)
NAME (PRINT)	SIGI	NATURE		TITLE
s described in ORS 366.490 and OAR 734-030-0025 1) Coffee, nonalcoholic beverages and cookies may be of charge. Distribution of carbonated beverages is not all areas with carbonated beverage vending machines. 2) Distribution of food, other than cookies prepared in a liprohibited. 3) Donations may be received for the items provided but requested. One opaque container with the word "dona" "contributions" in a maximum of one-inch letters may be the "Free Coffee" service is to be located in the area of service must not obstruct access to any building or other the rest area. 5) The area is to be kept clean of all litter, cups, etc. attril service. 6) No more than two (2) signs or posters identifying the service organization by name only may be used i.e. "Free Coffeet organization by name only may be used i.e. "Free Coffeet organization by name designated for the service inclusivithin which the service is provided.	lowed in rest icensed facility, is not sought or ations" or be used. designated. The her structure in butable to the rervice and the feeServed By quare feet each	signs to remove permit 8) The De water a electric 9) The organism the De 10) The organism regular bever 11) Permit	that may be provided by the Doed when the service is closed expartment of Transportation may and electricity in the rest area. It is all use to 120V 20 AMPS. It is ganization is responsible for all sary for the service and any expartment as a result of this seganization shall comply with settions including state and local attions in the distribution of coffages and cookies under this p	and upon expiration of the ay provide limited access to The organization shall limit I equipment and supplies straordinary costs incurred by rvice. tate and local rules and health department rules and ee, other nonalcoholic ermit.
APPROVED AS REQUESTED APPROVED WITH THE FOLLOWING AME The area designated for this service is described as for To report critical safety rest area service such as leaking the permit is granted with the specific understanding the property resulting from the operation of this service. The commission and members thereof, Department of Transpections resulting from or arising out of the acts, conduct of the acts, conduct of the acts.	ENDMENT: Illows or shown on to the shade of the Permittee shall in portation their office.	ed toilets, call: _ all be responsible and manify and ho ers, agents and	e and liable for all accidents do old harmless the State of Oreg employees, against any loss, i	amages or injuries to persons on, its Oregon Transportation injury, damage, claims, suits or