

KWIKTRIP™**KWIKSTAR****KITCHEN
CRAVINGS®**

Pizza Concession Sales Application

Please complete the information below to initiate the process of selling Kitchen Cravings® Cheese Mountain® Pizza and return to your nearest Kwik Trip/Kwik Star Store Leader.

Organization's Name _____

Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone # of Contact Person _____

Organization's Federal Tax ID# _____

Event _____

Kwik Trip/ Kwik Star Store Location _____

*(The pizzas, ovens and warmers will be delivered to this store)***Store Leader, make a copy of this application for the guest, keep original at store level.****Please send form to SEDispatch@kwiktrip.com if organization needs pizza warmer or oven.****FREE to use with the purchase of pizzas!**

Number of Pizza Ovens _____

Number of Pizza Warmers _____

FOOD SAFETY GUIDELINES**Prep:** Pull only as much product from the cooler/freezer as can be prepared at one time.**Thaw:** Thaw all products in a cooler with a temperature between 32° F and 40° F. Thaw in microwave **IF** part of the continuous cooking cycle.**Cooking:** Follow baking instructions on recipe. For product safety, use stem thermometer to verify **INTERNAL** product temperature listed on recipe.**Hot Holding:** Hold product at 140° F or higher.**Cold Holding:** Hold product at 40° F or lower.**Cooling:** Cool to 70° F within 2 hours, then to 40° F or lower within an additional 4 hours. If temperature does not reach 70° F or lower in the first 2 hours, food must be reheated or discarded.**Reheating:** Heat to internal temperature of 165° F for 15 seconds within 2 hours. If temperature does not reach 165° F within 2 hours, discard product.**DANGER ZONE:** Do **NOT** hold pizza between 40° F and 140° F for longer than four hours.

I certify that I represent the above-named organization and proceeds from the sales of Kitchen Cravings Cheese Mountain Pizza fundraising products purchased by this organization will be used for the purpose state above. My organization agrees to return equipment to Kwik Trip/Kwik Star in the same condition it was delivered, normal wear and tear expected, or the organization agrees to cover the cost of replacement of the equipment.

Signature _____ Date _____