

TEMPORARY FOOD FACILITY APPLICATION

All individual Temporary Food Facilities (TFFs) (both for-profit and non-profit) are required to submit a signed and completed application, with attachments and drawing of TFF to Environmental Health Services **at least two weeks prior** to the start of the event. This is critical for proper review. The TFF fee may be waived for non-profit charitable organizations operating temporary food events no more than four times per year for no more than three days in duration. Fee waiver is contingent on submittal of proof of non-profit status, completed signed application, with attachments and drawing at **least two weeks prior** to the start of the event.

ANNUAL - Check the appropriate box (A or B)

- A. Annual - for-profit low risk booth (max. 500 sq. ft.) operating at each recurring community event or swap meet at a single location with two or more booths with food service limited to commercially prepackaged, nonpotentially hazardous food (nuts, jerky, bottle water, canned soda and similar snacks) and/or whole uncut (not ready to eat) produce - (A person or organization must be designated as an Event Organizer) \$180 [1656]
- B. Annual - for-profit booth (max. 500 sq. ft.) at each single recurring community event (e.g. popcorn), or swap meet with services limited to nonpotentially hazardous food - \$350 [1657]

NON-ANNUAL - Check the appropriate box (C or D)

- C. Booth operating at a community event with two or more booths (max. 500 sq. ft. each) (A person or organization must be designated as the Event Organizer - requires an Event Organizer Application)
- D. Single Booth (max. 500 sq. ft.) operating at a community event (e.g., city festival, fair, political or educational event approved by the Health Department)

FOR OFFICE USE ONLY	
Date Rec'd _____	
Rec'd By _____	
Amt Rec'd \$ _____	
Check # _____	
Receipt # _____	
Record # _____	
P/E: 16 _____ District _____	
FA # _____	
EV # _____	
Bluebook Types:	
<input type="checkbox"/> Application Late [05]	
<input type="checkbox"/> Exemption Lost / Exceeded Frequently [06]	

Check the appropriate circle (either 1, 2, 3, 4 or 5)

- 1. For-profit entity – must be associated with a community event (C or D above) - \$180 [1674]
- 2. For-profit low risk booth operating at a recurring community event or swap meet at a single location with two or more booths with food service limited to commercially prepackaged, nonpotentially hazardous food (nuts, jerky, bottled water, canned soda and similar snacks – does not include produce). Staff time limited to 30 minutes. - \$84 [1675]
- 3. A Permitted Food Facility on behalf of a nonprofit organization and no monetary benefit – to the for-profit - does not exceed 3 days in a 90-day period. (*Exemption Request Letter required*) - \$180 (*unless fee is waived – see above conditions*) [1652].
- 4. Non-profit charitable organization – limited to no more than four times per year for no more than three days in duration - \$180 (*unless fee is waived - see above conditions*) [1677]
- 5. Non-profit charitable organization serving only nonperishable prepackaged low risk food such as candy or baked goods that are adequately protected from contamination and/or commercially prepackaged- \$84 (*unless fee is waived - see above conditions*) [1678]

Attachments:

- 1. Non-profit Charitable Organization: Proof of non-profit status or IRS Exempt Registration # _____
- 2. Exemption Request Letter (*reference B (2) above*)
- 3. Drawing of Temporary Booth Establishment (*Sketch #1*)
- 4. On-site Food Preparation Form (*Attachment A*)
- 5. Off-site Food Preparation Form (*Attachment B*)
- 6. Employee Log Form (*Attachment #C*)

Name of Community Event: _____

Name of Booth/Organization: _____

Owner/Contact Person: _____ Sponsoring Organization _____

Mailing Address (*Street # / Name/City/Zip*): _____

Phone Number: _____ Cell Phone Number: _____ Fax: _____

Booth Location: _____

Street Number	Direction	Street Name	City/Town	Zip Code
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Date(s) and time(s) the booth will be operating		Date(s) and time(s) booth will be set up and ready for inspection	
Date	Time	Date	Time
1.		1.	
2.		2.	
3.		3.	

List **all** food and beverage items to be prepared and served on the attached booth form (*attachment A*). (*NOTE: Any changes to the menu must be preapproved by Environmental Health Services*).

Will all food be prepared at the booth site? Yes (*Complete attach. A for on-site preparation*) No (*Complete attachment B for all food prepared off-site. Include a copy of the current Health Permit for the permanent food establishment where the food will be prepared*).

Describe (*be specific*) how frozen, cold, and hot foods will be transported to the booth: _____

How will food temperatures be monitored during the event? _____

Identify the place of purchase for each meat, poultry, seafood, and shellfish item(s). Include the source of the ice: _____

Using Attachment C; record the names, phone numbers, shifts to be worked during the event and the assigned duties of all booth workers (*paid and volunteer*).

Describe the number, location and set up of hand washing facilities to be used by the booth workers (*see page 6 of Guidelines*)

Identify the source of the potable water supply and describe how water will be stored and dispensed. (*see page 6 of Guidelines*)

Where will utensil washing take place. (*see page 7 of Guidelines*) _____

How will wastewater from hand washing and utensil washing will be collected, stored and disposed (*see page 8 of Guidelines*):

List the materials for floors, walls and ceiling surfaces of the booth. (*see page 11 and 12 of Guidelines*)

Floor: _____

Walls: _____

Ceiling: _____

Describe how electricity will be provided to the booth (*include available amperage and your equipment electrical demand(s)*):

Please add any additional information about your booth that should be considered (*such as fire prevention considerations*):

Booth Diagram: _____

I hereby certify that the above information is complete and correct. Failure to complete any portion of this application may result in denial of a health permit. I fully understand that any deviation from the above without prior permission from Environmental Health Services may nullify final approval.

I understand approval of these plans and specifications by Environmental Health Services does **not** encompass compliance with any other code, law or regulation that may be required (i.e., federal, state, or local). Furthermore, it does not constitute endorsement or acceptance of the completed establishment (structure or equipment).

I also understand a pre-opening inspection of the facility will be conducted and the inspection will include equipment being in place and operational.

Print Name Signature Date

Print Name Signature Date

FOR OFFICE USE ONLY

Approved Disapproval By: _____ Date _____

Temporary Food Facility Permit Effective Dates: From: _____ To: _____

Permit Restrictions _____

Reason(s) for Disapproval: _____

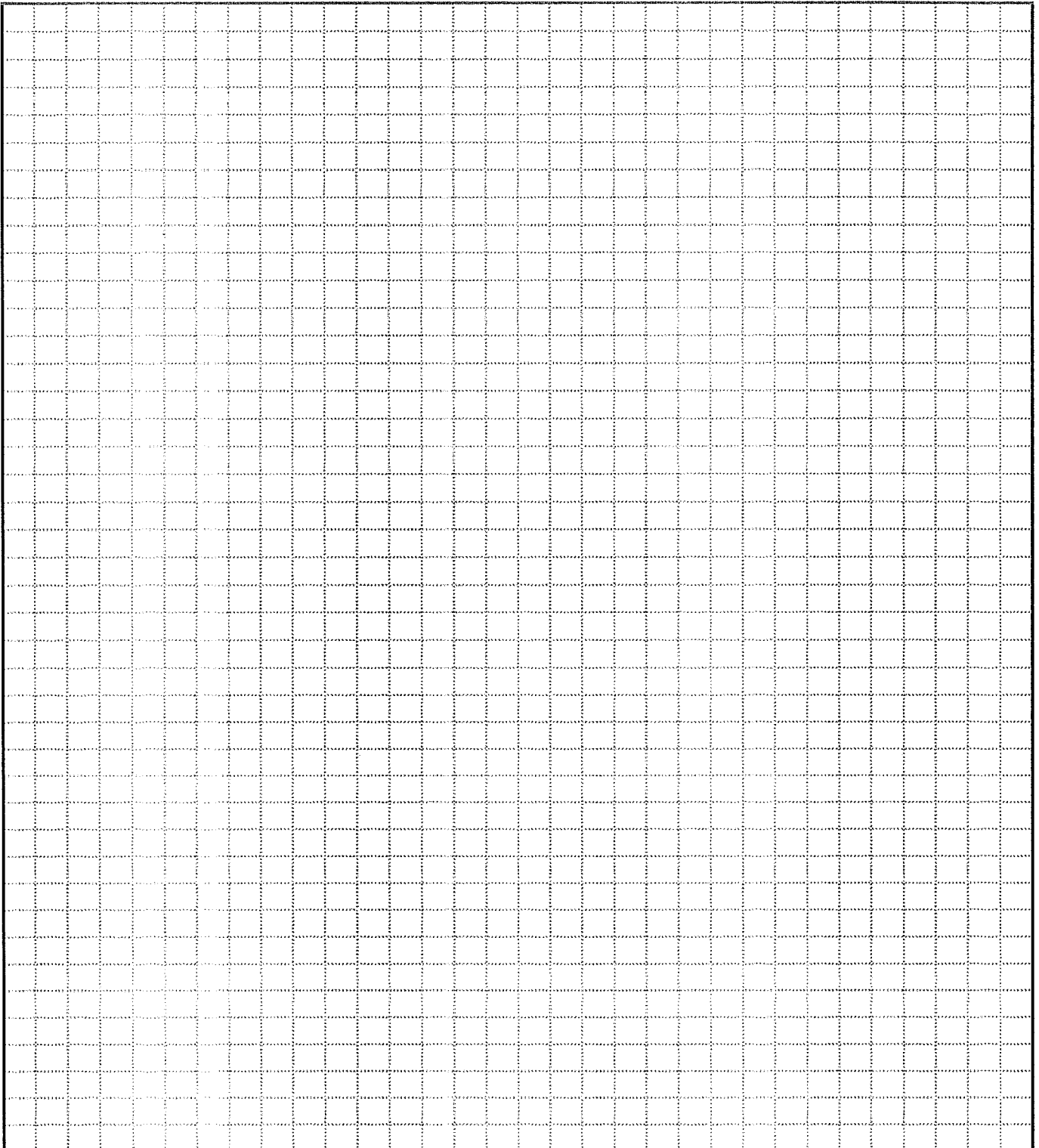
Final Inspection / Clearance By: _____ Date: _____

Sketch Sheet 1

Drawing of Temporary Food Booth

Name of Booth: _____

In the following space, provide a drawing of the Temporary Food Booth. Identify and describe all equipment including cooking and cold holding equipment, handwashing facilities, work tables, dishwashing facilities, food and single service storage, garbage containers, and customer service areas.



Sample Temporary Food Booth Drawing

