

INSTRUCTIONS FOR COMPLETING VENDOR APPLICATION FOR A TEMPORARY FOOD ESTABLISHMENT PERMIT

1. Enter the name of the event where the TFE (temporary food establishment) will be operating.
2. Indicate the location of the event.
3. Indicate the dates and times the TFE will be operating at the event.
4. Indicate the name of the business or organization that will be running the TFE.
5. Indicate the name of the person completing the application.
6. Indicate the mailing address for the person completing the application.
7. Indicate telephone numbers for contacting the applicant between 8 AM and 5PM. Also indicate alternate means of contacting the applicant.
8. Indicate the email address for the person completing the application.
9. Indicate whether or not a permit will be required for the operation. In order to be exempt from permitting (indicate a "YES" answer on the application), you must meet one of the following sets of conditions:

Be exempt from paying North Carolina or federal income taxes (501c3), not have operated or plan to operate a food service facility of any type anywhere in the state of North Carolina during the month the event is scheduled, and plan to operate for 2 consecutive days or less. **If you are claiming this exemption, you must submit a letter from the North Carolina Department of Revenue or the Internal Revenue Service indicating you are exempt from paying income taxes.**

Be raising funds for a political candidate or committee as defined in NCGS 163-278.6(14) and not have operated or plan to operate a food service facility of any type anywhere in the state of North Carolina during the month the event is scheduled. **If you are claiming this exemption, you must submit a letter from the political candidate or a recognized political action committee authorizing you to raise funds on behalf of the candidate.**

Be a nutrition program for the elderly that is administered by the Division of Aging of the North Carolina Department of Health and Human Services and prepare and serve food or drink on the premises where the program is located for fund raising no more frequently than one day each month.

If one of the three exemptions applies to you, you should answer, "YES" to question 8. While we recommend you continue and complete the remainder of the application, you are not required to do so. If none of the exemptions apply, you must answer "NO" to question 8 and complete the entire application.

10. If some or all of the food will be prepared prior to the event, indicate the name and address of the facility where preparation will occur, and indicate the date(s) and time(s) food will be prepared. Also indicate the name of the person authorizing you to use the **permitted** facility and provide a contact number. An inspection of the facility may be required prior to approving your application.

11. Indicate the distance food will be transported to the site and the amount of time the trip will take.

12. Indicate how foods will be maintained at proper temperatures during transport to the event site.

13. Describe the equipment that will be used to ensure foods are maintained at 45°F or below or 135°F or above. Also, indicate the equipment that will be used for cooking food and reheating food that has been prepared prior to the event.

14. Indicate the source of water that will be used during the event. If you indicate "Other", specify where the water will be obtained.

15. Indicate how and where wastewater will be held and disposed of during the event.

16. Indicate the type equipment that will be provided for hand washing. If you indicate "Other", specify the equipment to be used. If you are using a gravity system, you should plan on providing the following:

- 5 gallons of water at a temperature of 90-110°F in an insulated container with a spigot
- A container for catching the wastewater
- Hand soap in a pump dispenser
- Paper towels

17. Indicate how garbage and trash will be handled and the disposal method.

18. Indicate the methods of holding and disposing of recyclables.

19. Indicate the type toilet facilities that will be provided for those attending the event. If you indicate "Other", specify the type of facilities that will be provided.

20. Review the application for accuracy and completeness. Sign the application after completing the following:

- Provide answers to questions 1 through 19.
- Indicate all foods to be served on "Foods Being Served and Methods of Preparation" page
- Attach sheets showing ingredients and methods of preparation.
- Attach a diagram indicating how equipment will be placed at your stand.

Note: an example lay-out is provided for your information. You should use this only as a guide unless you will actually be setting your stand up in this manner. Your actual setup will be checked against the diagram you submit. Deviations from the approved setup provided to us may delay or prevent your receiving a permit to operate.

***You must return the completed application to your event coordinator or to the Health Department at least 10 days prior to the event with payment of \$75 (payable to DCHD) for the permit. If a permit is not issued the check will either be shredded or returned marked void. It is the vendor's responsibility to assure payment is made to the Health Department.**

The following checklist is provided for your use. All items must be completed in order to receive a permit.

___ Submit Temporary Food Establishment Vendor Application no later than 10 days prior to the event.

___ Sanitizer made with regular bleach (not scented) mixed with water to make 50 ppm solution or other approved sanitizer.

___ Sanitizer test strips must be provided

___ Metal stem thermometer for refrigeration (45°F or below) and for hot holding (135°F or higher). Food thermometers should read 0°F-220°F.

___ Water under pressure and the ability to heat water shall be provided.

___ Adequate utensil washing set-up shall be provided. In lieu of utensil wash set-up, extra utensils that are cleaned and sanitized shall be provided to switch out during the event.

___ A separate hand wash set-up with antibacterial soap and paper towels and wastewater catch basin if necessary.

___ Hair restraints (baseball hat or hair net)

___ Adequate and approved supply of ice. Ice scoops and separate bin for the consumption ice.

___ Food stored off the floor/ground (potatoes, onions etc. must be stored on a pallet or other approved means)

___ All food handling and cooking must be done in a protected area. This area shall have overhead coverage.

___ Open displays must be protected from contamination by sneeze guards or other barriers.

___ Dispensers for condiments (i.e. prepackaged, squeeze bottles, or hinged lid containers).



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Davie County Health Department Environmental Health Section

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Courier # : 09-40-06
Mocksville, NC 27028



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VENDOR APPLICATION FOR A TEMPORARY FOOD ESTABLISHMENT PERMIT

1. Event: _____

2. Location of event: _____

3. Dates/time of operation: Begin date: _____ Begin time: _____

End date: _____ End time: _____

4. Your organization/business name: _____

5. Applicant's name: _____

6. Applicant's address: _____

Address

City

State

Zip

7. Applicant's telephone: _____

8 AM - 5 PM

Night/Other

8. Applicant's email address: _____

9. Are you claiming a permit exemption as a nonprofit organization, as a political fundraiser, or an elderly nutrition program administered by the Division of Aging of the Department of Health and Human Services? **(See instructions before answering yes to this question.)**

YES => A permit will not be required for your operation. Attach a copy of the exemption letter from the North Carolina Department of Revenue or the Internal Revenue Service, or a letter from the candidate or political action committee authorizing you to act in this capacity along with the information requested above. It is recommended that, at a minimum, you complete the "Work Schedule" that is attached for your records.

NO => A permit will be required for your operation. Continue with the application.

10. All food and beverage must be prepared on-site or in a **permitted** kitchen (not a domestic kitchen). Provide the name and address of the advance preparation facility, the dates and times it will be used, and the name and telephone number of the person who authorized you to use the facility.

Facility name: _____

Address: _____

Date and time of advance preparation: _____

Approval to use granted by: _____ Telephone: _____

11. Indicate the distance and time for transporting food or beverage to the food service site.

Distance: _____ Time: _____

12. How will food temperatures be maintained during transportation? _____

13. Describe equipment to be used at the event for:

a.) Cold holding: _____

b.) Hot holding: _____

c.) Cooking: _____

d.) Reheating: _____

14. Water source: On-site municipal supply On-site well Other

15. How will you dispose of wastewater: _____

16. Means for handwashing: Plumbed sink Gravity flow Other

17. Means of garbage disposal: Dumpster Trash cans collected on-site Other

18. Means of recycle collection: Recycle bins Dumpster Other

19. Toilet facilities: Chemical toilet Public building Other

A diagram indicating how equipment will be placed at your stand must be attached to this application.

Note: An example layout is provided for your information. You should use this only as a guide.

Your actual setup will be checked against the diagram you submit. Deviations from the approved setup provided to us may delay or prevent your receiving a permit to operate.

I certify the information in this application is complete and accurate. I understand the DCHD (Davie County Health Department) does not provide verbal approval of plans or for deviation from approved plans, and that any deviation from the plans and procedures in this application without prior written permission from the DCHD may nullify final approval and result in my not obtaining a permit, or having the permit suspended or revoked after it is issued.

Signature: _____ Date: _____

THIS SECTION FOR HEALTH DEPARTMENT USE ONLY

Approval of these plans and specifications by the Davie County Health Department does not indicate compliance with any other code, law or regulation that may be required — federal, state, or local. It further does not constitute endorsement or acceptance of the completed establishment (structure or equipment). An inspection of the establishment with equipment in place will be necessary to determine if it complies with the local and state rules governing temporary food service establishments.

PLAN APPROVAL BY:

DATE:

EHS COMMENTS:

TEMPORARY FOOD SERVICE ESTABLISHMENT APPLICATION – Foods Being Served and Methods of Preparation

Potentially Hazardous Food Items (i.e. meat, fish, shellfish, poultry, eggs, milk and dairy products)	Advance Preparation?	COOKING PROCEDURES PLEASE DESCRIBE ALL THAT APPLY					
		THAW	PREP	HOLD	COOL	REHEAT	OTHER
Ex: Beef loin bought from Food Lion, Valley Rd, Mocksville, NC on 6-26-07	Yes. Preseasoned in permitted church kitchen	In church cooler	Cube and Season	Grill Onsite	N/A	N/A	N/A

***PLEASE FEEL FREE TO ATTACH A SEPARATE SHEET IF MORE ROOM IS NEEDED**

List remaining food and beverages to be served. Indicate if beverages are packaged products or if will be poured on site. (Note: approved ice and ice storage must be used if pouring).

1.	5.	9.
2.	6.	10.
3.	7.	11.
4.	8.	12.

TEMPORARY FOOD ESTABLISHMENTS

Keep This For Your Reference

FOOD PROTECTION

1. All foods must be obtained from approved sources. Hamburgers, hot dogs, sausages, etc., must be obtained from an approved, permitted commercial source, in its final form, ready to be cooked.
2. Once a vendor receives food, the food must be kept protected from any type of contamination. These foods must be maintained hot (135°F or higher) or cold (45°F or below) at all times. This includes during transportation to the site, and before and/or after cooking. Participants must have refrigeration and heating equipment capable of maintaining these temperature requirements. Pre-cooked foods that have been cooled, must be rapidly heated to 165°F, and then maintained at a minimum of 135°F.
3. All food handling/cooking must be covered overhead with at least a tent like roof. At no time is any item of food to be placed on the ground.

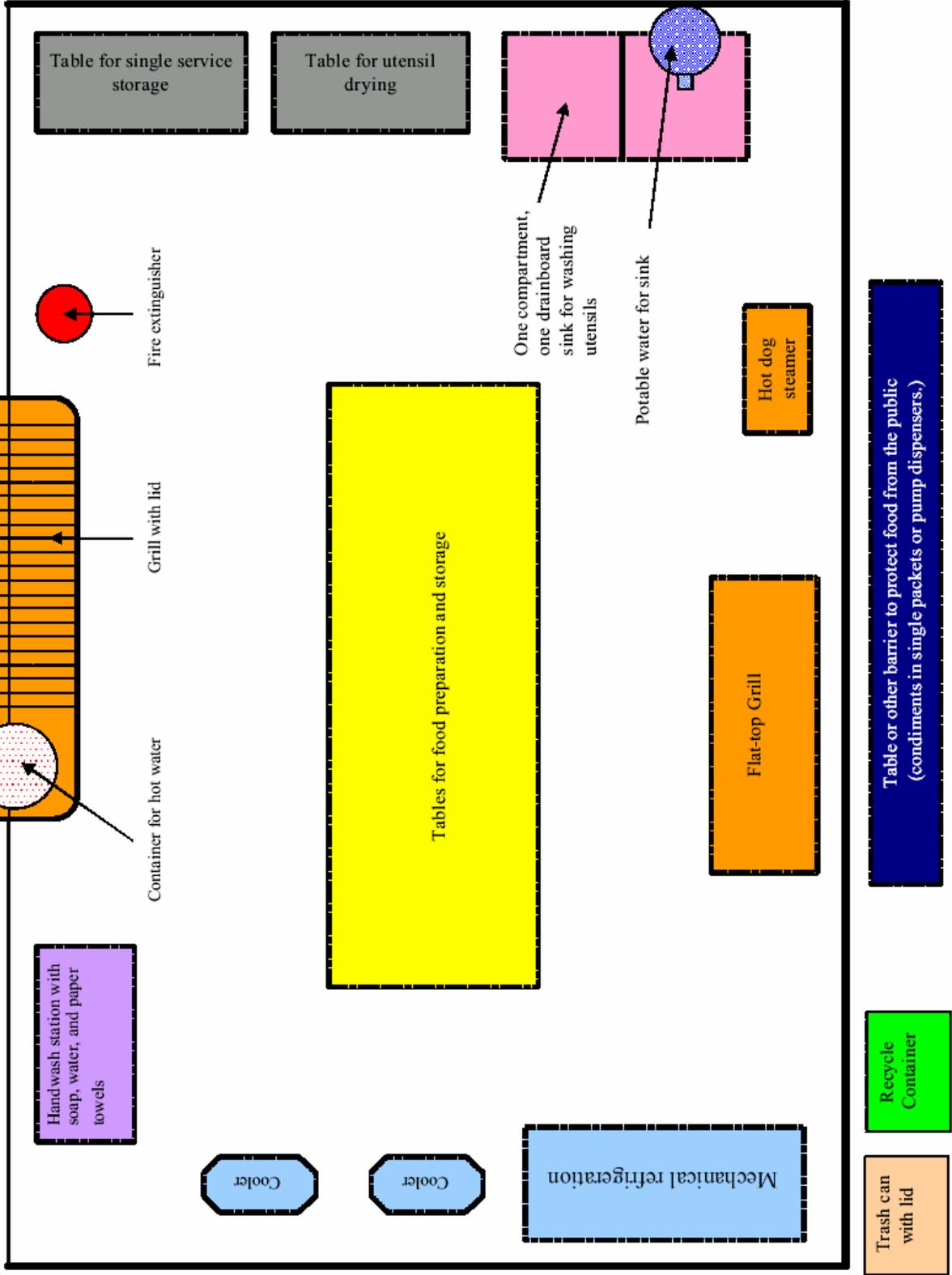
PERSONAL HYGIENE

1. Participants must wear clean clothing and hair restraints.
2. No person who has a contagious or infectious disease, wound or boil will be allowed to work in a food booth.
3. Persons involved in food sales, handling money and customer contact duties should not be involved in food preparation unless they first wash their hands.
4. Proper hand washing must be completed after smoking, eating, visiting the toilet facilities, sneezing, etc., before returning to food preparation.
5. No smoking will be allowed inside food booths.

CLEAN UP

1. All utensils, warmers, griddles, etc., must be cleaned routinely and maintained in a sanitary manner.
2. Participants will need to bring sufficient numbers of clean cooking utensils so that the soiled utensils can be replaced with clean utensils as needed during the day.
3. **NO DUMPING** of liquid waste or grease into storm drains or on the ground's surface. Acceptable receptacles for disposal of these products are required.
4. General cleaning must be maintained in all booths. This includes the premises (grounds) surrounding your establishment. All garbage and refuse shall be removed at least daily and disposed of in a sanitary manner.
5. Utensils and food prep surfaces must be washed, rinsed and sanitized. (Sanitizing solutions that may be used: Chlorine 50ppm, Quaternary Ammonia 200ppm or Iodine 12.5ppm)

Example equipment layout



Note: Flv control will be achieved by use of net screening on back and sides of tent and fans along the front.