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225 Camino Del Remedio, Santa Barbara, CA. 93110 ◆ (805) 681-4900 2125 S. Centerpointe Pkwy., #333 ◆ Santa Maria, CA 93455-1340 ◆ (805) 346-8460

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 <u>at least two weeks prior</u> 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 <u>least two weeks prior</u> to the start of the event.

ANNUAL - Check the appropriate box (A	or B)		
A. Annual - for-profit low risk booth ity event or swap meet at a single loca to commercially prepackaged, nonp canned soda and similar snacks) and/o organization must be designated as an	(max. 500 sq. ft.) operate ation with two or more botentially hazardous foor whole uncut (not read; Event Organizer) \$180	booths with food service limited bod (nuts, jerky, bottle water, y to eat) produce - (A person or [1656]	FOR OFFICE USE ONLY Date Rec'd Rec'd By Amt Rec'd \$ Check #
B. Annual - for-profit booth (max. 50 popcorn), or swap meet with services	0 sq. ft.) at each single r limited to nonpotentially	ecurring community event (e.g. <u>hazardous food</u> - \$350 [1657]	Receipt #
NON-ANNUAL - Check the appropriate			P/E: 16 District
C. Booth operating at a community e person or organization must be des Organizer Application)	vent with two or more beignated as the Event (Organizer - requires an Event	FA # EV # Bluebook Types: Application Late [05]
D. Single Booth (max. 500 sq. ft.) o political or educational event approve	perating at a community d by the Health Departm	y event (e.g., city festival, fair, ent)	Exemption Lost / Exceeded Frequently [06]
Check the appropriate circle (either)		1	
O 1. For-profit entity – must be asso	ciated with a community	y event (C or D above) - \$180 [167	<i>1</i> 4]
booths with food service limited t	to commercially prepack	nunity event or swap meet at a sing aged, nonpotentially hazardous for the). Staff time limited to 30 minutes	od (nuts, jerky, bottled water,
ceed 3 days in a 90-day period. (A	Exemption Request Letter re	anization and no monetary benefit equired) - \$180 (unless fee is waive	d – see above conditions) [1652].
\$180 (unless fee is waived - see a	bove conditions) [1677]		
O 5. Non-profit charitable organizathat are adequately protected from conditions) [1678]	tion serving only <u>nonper</u> n contamination and/or c	rishable prepackaged low risk food commercially prepackaged- \$84 (<i>u</i> .	such as candy or baked goods nless fee is waived - see above
Attachments:			
 □ 1. Non-profit Charitable Organization: □ 2. Exemption Request Letter (reference) □ 3. Drawing of Temporary Booth Esta □ 4. On-site Food Preparation Form (Annual Content of the Content of the	e <i>B (2) above</i>) blishment (<i>Sketch #1</i>)	us or IRS Exempt Registration # 5. Off-site Food Prepa 6. Employee Log Form	ration Form (Attachment B)
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 Direct		•	Zip Code
Date(s) and time(s) the booth wi			be set up and ready for inspection
Date	Time	Date	Time
1.		1.	
2.		2.	

3.

List <u>all</u> food and beverage items to be prepared an must be preapproved by Environmental Health Services	nd served on the attached booth forms).	n (attachment A). (NOTE: Any	changes to the menu
Will all food be prepared at the booth site? ☐ Yes prepared off-site. Include a copy of the current Health	s (Complete attach. A for on-site prepa	nration) 🏻 No (Complete attac Shment where the food will be pr	hment B for all food repared).
Describe (be specific) how frozen, cold, and hot for	oods will be transported to the boot	h:	
How will food temperatures be monitored during	the event?		
Identify the place of purchase for each meat, poul	try, seafood, and shellfish item(s).	Include the source of the ice:	
Using Attachment C; record the names, phone numbers (paid and volunteer).	mbers, shifts to be worked during t	he event and the assigned du	ties of all booth
Describe the number, location and set up of hand	washing facilities to be used by the	: booth workers (see page 6 o	of Guidelines)
Identify the source of the potable water supply an	d describe how water will be stored	l 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 uter	nsil washing will be collected, store	ed and disposed (see page 8 o	of Guidelines):
List the materials for floors, walls and ceiling sur Floor: Walls:	faces of the booth. (see page 11 and	d 12 of Guidelines)	
Ceiling: Describe how electricity will be provided to the b	ooth (include available amperage	and your equipment electrica	al demand(s)):
Please add any additional information about your	· booth that should be considered (s	uch as fire prevention consid	derations):
Booth Diagram: I hereby certify that the above information is completed establishment (structure or equipment). I understand approval of these plans and specification code, law or regulation that may be required (i.e., fed completed establishment (structure or equipment). I also understand a pre-opening inspection of the facitional.	ition from the above without prior pe ions by Environmental Health Servic deral, state, or local). Furthermore, it of	rmission from Environmental es does <u>not</u> encompass compl loes not constitute endorsemen	Health Services may liance with any other it or acceptance of the
Print Name	Signature		Date
Print Name	Signature	****	Date
☐ Approved ☐ Disapproval By: Temporary Food Facility Permit Effective Dates: Permit Restrictions	From:	Date	
Final Inspection / Clearance By:		Date:	

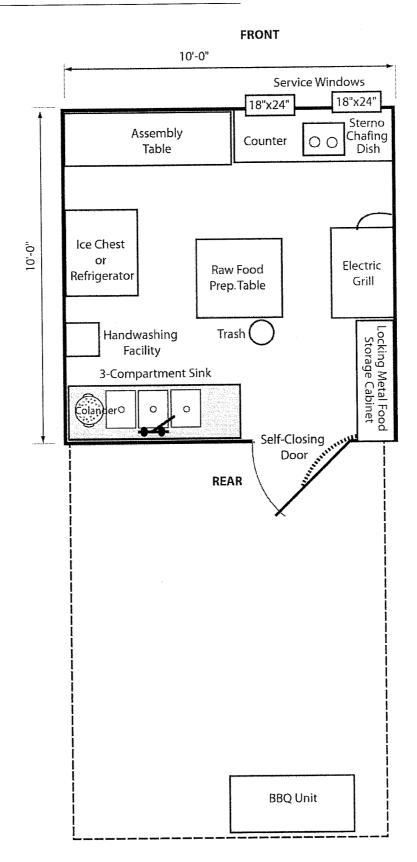
Sketch Sheet 1

Drawing of Temporary Food Booth

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EHS 16-11 (Rev. 6/02)

Sample Temporary Food Booth Drawing



On-Site Food Preparation at Temporary Booth

Any changes to the menu must be submitted to and approved by the Regulatory Authority (Attachment A)

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Commercial Pre-Portioned Package	N/A						***************************************								***************************************								
Reheating How?	If below 140 °F it will	bethrown away.		***************************************			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,																
Hot Holding How? Where?	Sterno-chafing	dishes with lids at	least 140°F																				
Cook How? Where?	BBQ at event to	165°F.												·									
Cold Holding How? Where?	In coolers on ice	transported from	restaurant at 10am and 2pm.																			<u></u>	
Cut / Wash Assemble Where?	Restaurant												:			<u>: </u>			<u> </u>				
THAW How? Where?	Fresh	seeformB				<u> </u>	L	<u> </u>			<u> </u>					 					I		
FOOD	Marinated chicken	píeces			***************************************			***************************************	***************************************					***************************************		***************************************	***************************************						

Off-Site Food Preparation (at a Licensed Permanent Food Facility) Any changes to the menu must be submitted to and approved by the Regulatory Authority (Attachment B)

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Commercial Pre-Portioned Package	none							***************************************		<u>. </u>												 	
Reheating How?	none							***************************************															
Hot Holding How? Where?	none										***************************************												
Cook How? Where?	Transported in	bagsonicein	5																				
Cold Holding How? Where?	Arranged on	Baking sheets in	restaurant																				
Cut / Wash Assemble Where?	RinsedEr	Placed in 5	Qt. plastic		•										:								
THAW How? Where?	bought	Freshfrom	Albertsons		<u> </u>			 															
FOOD	BBQ marinated	chicken pieces																					

Employee Log

Name of Food Booth:
At all times of operation, there shall be a least one booth operator present who has completed a food safety course administered by Environmental Health Services or a recognized provider of food safety training. Signify below who that person(s) is by placing a "\sqrt{"}" by the name. Attached a copy of the food safety training certification if the person(s) completed training by a recognized provider of food safety training.

NAME	DATE	ASSIGNMENT	TIME IN	TIME OUT
·				
EHS 16-10 (Rev. 11/09)				

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