



# Mecklenburg County Health Department

## Temporary Food Event Vendor Application

This application must be completed and submitted to the MCHD (Mecklenburg County Health Department) to provide information about all food preparation and sales to the public at any public event or exhibition within Mecklenburg County. **Applications must be submitted no later than 15 days prior to the event.**

Please Note: A fee of \$75.00 will be required for each food service permit and must be paid with the submission of each Food Vendor Application.

1) Name of Event: \_\_\_\_\_ Date of Event: \_\_\_\_\_

2) Address of Event: \_\_\_\_\_  
Street City State Zip

3) Name of Vendor: \_\_\_\_\_ Vendor Phone: \_\_\_\_\_

4) Vendor Business Name: \_\_\_\_\_

5) Vendor Business Address: \_\_\_\_\_  
Street City State Zip

**\*\*Please note: food booth must be completely set up prior to permitting and NO food preparation is allowed in the booth until the permit is issued\*\***

6) Date for permitting: \_\_\_\_\_ 7) Time for permitting: \_\_\_\_\_

8) Applicant Email Address: \_\_\_\_\_

9) Will vendor prepare food prior to the event?  Yes  No

If you checked "yes" food will be prepared prior to the event\*, provide the name of the facility where food will be prepared:

Name of Prep Facility: \_\_\_\_\_ Date of preparation: \_\_\_\_\_ Time of Preparation: \_\_\_\_\_

Address of Prep Facility: \_\_\_\_\_  
Street City State Zip

**\*Please Note: Advanced preparation may require a permit by MCHD for the preparation site.**

10) As of September 1, 2012, the vendor/permit holder shall require all food service employees to comply with an approved Employee Health Policy. Do you have an approved Employee Health Policy?  Yes  No

11) Please check the box that best describes the source of water for your food booth:

- Public water supplied by organizer (requires food grade hose)
- Tap water supplied by vendor
- On-site private well (requires sampling by MCHD)
- Bottled water supplied by vendor

12) Check the box that best describes the disposal method for the following:

- |                                                  |                                                   |                                                  |
|--------------------------------------------------|---------------------------------------------------|--------------------------------------------------|
| <u>Garbage:</u>                                  | <u>Wastewater:</u>                                | <u>Grease:</u>                                   |
| <input type="checkbox"/> Waste can taken offsite | <input type="checkbox"/> Portable toilet at event | <input type="checkbox"/> Grease taken offsite    |
| <input type="checkbox"/> Event dumpster          | <input type="checkbox"/> Event grey water bin     | <input type="checkbox"/> Event grease receptacle |
| <input type="checkbox"/> Other: _____            | <input type="checkbox"/> Other: _____             | <input type="checkbox"/> Other: _____            |

13) Check the box that best describes your equipment:

- |                                                  |                                           |                                             |                                              |
|--------------------------------------------------|-------------------------------------------|---------------------------------------------|----------------------------------------------|
| <u>Cold Holding:</u>                             | <u>Hot Holding:</u>                       | <u>Utensil Washing:</u>                     | <u>Hand Washing Set-up</u>                   |
| <input type="checkbox"/> Refrigerated truck      | <input type="checkbox"/> Chafing dishes   | <input type="checkbox"/> 3 Utility sinks    | <input type="checkbox"/> Mechanical sink     |
| <input type="checkbox"/> Commercial refrigerator | <input type="checkbox"/> Electric hot box | <input type="checkbox"/> 3-compartment sink | <input type="checkbox"/> Gravity flow set-up |
| <input type="checkbox"/> Freezer                 | <input type="checkbox"/> Grill            | <input type="checkbox"/> 3 Basins           | <input type="checkbox"/> Other: _____        |
| <input type="checkbox"/> Other: _____            | <input type="checkbox"/> Other: _____     | <input type="checkbox"/> Other: _____       |                                              |

14) Will ready-to-eat produce (vegetables or fruit) be prepared in your food booth?  Yes (requires a prep sink)  No

15) Provide a complete list of all food/menu items in the chart below and check "Advanced Preparation" if the food/menu item will be prepared prior to the event or check "Prepared at Event" if no advance preparation is needed. Check both "Advanced Preparation" and "Prepared at Event" if food/menu item requires both types of preparation.

Please include all add-on items such as lettuce, tomato, onion, etc. (example: Hamburgers with cheese, lettuce, tomato, onion).

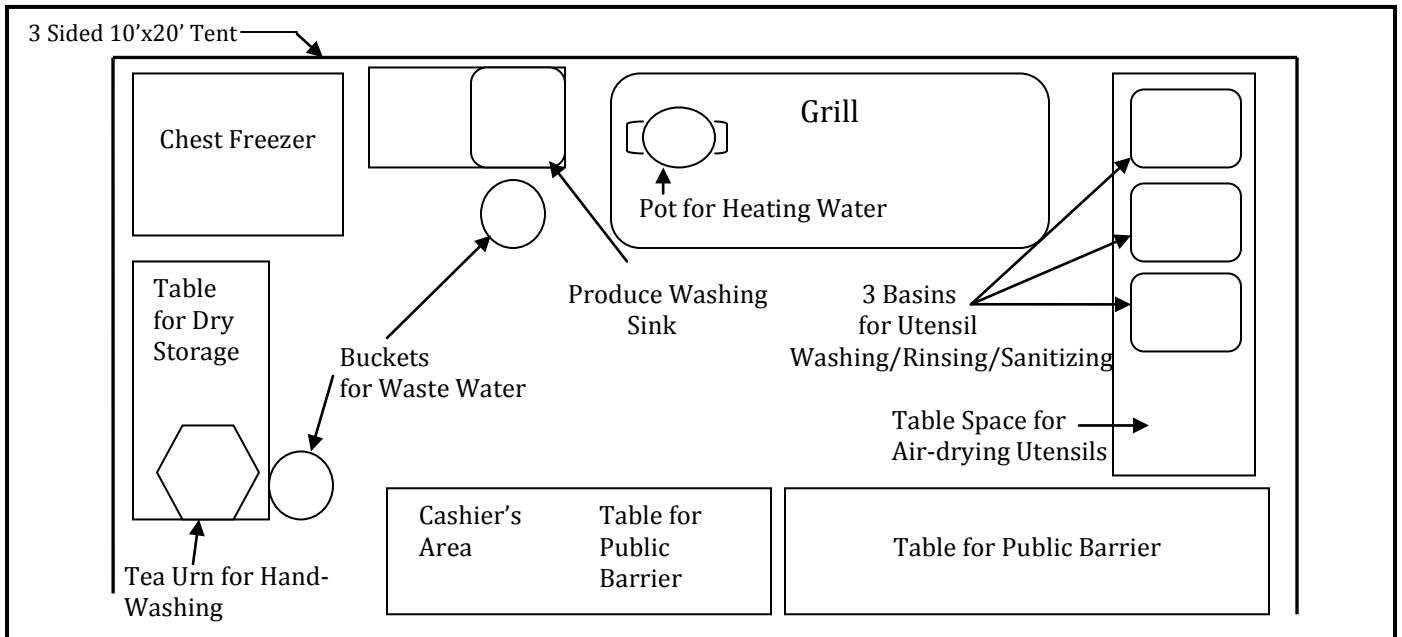
Food/Menu Items	Advanced Preparation*	Prepared at Event
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

\*Please note: food preparation may not exceed more than 7 days prior to the event.

16) Check the box which describes your food booth set up:

3-sided tent  Tent with fans  Mobile food unit  Other: \_\_\_\_\_

17) Find the following example of a typical food booth set-up. Please note that ALL food booths must have approved hand wash set-up and utensil washing set-up for washing, rinsing and sanitizing equipment. Other equipment needs may vary.



I certify that the information in this application is complete and accurate. I understand that:

- Any changes to my operation must be submitted to the Mecklenburg County Health Department for review and approval prior to the day of the event
- All potentially hazardous foods (PHF) that I am serving must be maintained at approved temperatures (45°F or below for cold food and 135°F or above for hot food) during transport, holding and/or service
- Failure to maintain approved temperatures for PHF may result in disposal or embargo of the food

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Reviewer Signature: _____	Office Use Only
Comments: _____	Date: _____



# Mecklenburg County Health Department

## Checklist for Temporary Food Establishment Vendors

The following is a checklist to assist a vendor in setting up a Temporary Food Establishment (TFE). All items on the checklist are necessary to obtain a permit for a TFE; however, additional requirements may be applicable. All applications must be submitted to the Mecklenburg County Health Department (MCHD) at least 15 days prior to the date of the event.

### Person in charge

- Available during all hours of food preparation

### Employee requirements

- Gloves
- Employee Health Policy Agreement
- Hat, hair net or visor

### Tent/weather proof structure/canopy

- Canopy over entire operation (smokers are not required to be under a canopy)

### Fly protection

- 3 solid or mesh sides
- Fly fans

### Ground covering

- Protection from dust/mud (in the absence of asphalt, concrete or grass)

### Water supply

- Approved water source (requires testing by MCHD if private well)
- Drinking water hose(s) – must be labeled
- A means to heat water

### Waste water disposal

- Buckets/grey water containers – must be labeled
- Disposal in approved sewage system or port-a-johns

- 3 basins (large enough to fit equipment)
- Drain board or counter space for air drying
- Soapy water, rinse water, sanitizer
- Sanitizer test strips

### Hand washing station

- At least 2 gallons of hot water under pressure
- Free-flowing faucet/stopcock
- Soap and disposable towels
- Wastewater catch bucket – must be labeled

### Approved/protected/secured food

- Approved source/food invoices
- Food storage above ground
- Separate vegetable washing sink (when preparing/serving ready-to-eat vegetables)

### Food temperatures

- Accurate food thermometer
- Cold holding: refrigeration/freezer/coolers with ice
- Hot holding equipment

### Food shields/customer barriers

- No food exposed to customers
- Approved self-service condiments

### Lighting (for night-time operations)

- Shielded above food/preparation

*I certify that I will comply with the requirements listed above and any other requirements as described by MCHD while operating my Temporary Food Establishment:*

**Vendor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_