



Food Protection Bureau
788 East Woodoak Lane
Murray, UT 84107
385-468-3845 slvhealth.org

Date ____/____/____

TEMPORARY FOOD ESTABLISHMENT APPLICATION

Est.# Approved On Hold - Additional Information Required DENIED Commissary Required

Read the following before completing this application:

- A complete application package with fees must be received 12 days before the event to avoid a **\$35 late fee**. Incomplete applications will not be approved.
- Payment is accepted via cash, check, money order, Visa or MasterCard.
- **Permit fees are not refundable. Permits are not transferrable.**
- Each booth location requires its own separate permit. Preparation of food at a separate commissary location requires an additional permit and inspection.
- All applicants must meet with an inspector to review this application. Please plan on at least 30 minutes.

Booth Name _____ Name of Business/Organization _____

Person(s) in Charge (PIC) _____ Mailing Address _____

Phone Number at Event _____ Alt. Phone Number _____ Email _____

# of Booths	Event Date(s)*	Event Name	Event Location Name & Address	Booth Start & Stop Time
1	October 12, 2019	Utah Firefighter Chili Cook Off	The Shops at South Town	6am to 4pm
				to
				to
				to
				to

***Operating a temporary food booth for more than 45 days in a calendar year requires an approved commissary.**

Anticipated temp event days this year:

Fee Schedule (Office Use Only)		Risk Level
<input type="checkbox"/> Low Risk Single Day: \$45. # of Days _____	<input type="checkbox"/> High Risk Single Day: \$65. # of Days _____	<input type="checkbox"/> Low Risk
<input type="checkbox"/> Low Risk 3-Day Event: \$50 (valid only for single event)	<input type="checkbox"/> High Risk 3-Day Event: \$95 (valid only for single event)	<input type="checkbox"/> High Risk
<input type="checkbox"/> Low Risk 14-Day Extended: \$295	<input type="checkbox"/> High Risk 14-Day Extended: \$395	
<input type="checkbox"/> Low Risk Seasonal: \$380	<input type="checkbox"/> High Risk Seasonal: \$495	

Applicant Signature: _____ Applicant Name (Print) _____

EHS Approval (Signature) _____ EHS Name (Print) _____ Date _____

FOOD PREPARATION AND MENU

Where will food be purchased? (Examples: Costco, Sam's Club) _____

- Menu: Only food items listed below will be approved to serve. Approval for any changes must be requested before the event.
- Any foods that require cooling must be done at an approved kitchen. Cooling hot food is not allowed at a temporary event.
- Temperature Control: Any food found in the Danger Zone above 41°F and below 135°F will be discarded.

MENU: Complete the table below. List all foods, beverages, and condiments that will be served. Use additional paper as needed.

Food Item	How purchased at store? (raw or pre-cooked)	Prepared in Booth or Approved Kitchen?	Transport item hot or cold? What type of equipment for transport?	Cold holding equipment used at event? (41°F or below)	Cooking/reheating equipment used? Final cook/reheat temperature?	Hot holding equipment used? (135°F or above) <i>*Sterno not allowed</i>
<i>Example: Hamburger</i>	<i>Raw</i>	<i>Booth</i>	<i>Cold Ice Chest</i>	<i>Ice Chest</i>	<i>Grill 155°F</i>	<i>Grill/Steam Table</i>

**Sterno or other canned fuel is not allowed at outdoor events unless used with commercially manufactured wind guards.*

EQUIPMENT LIST

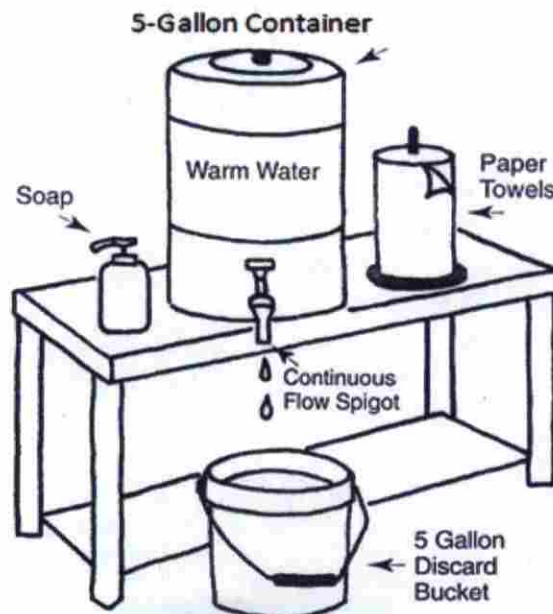
Identify equipment used at the event in your temporary food establishment booth. (check all boxes that apply)

<p>Handwash station (More than one may be required)</p> <p><input checked="" type="checkbox"/> 5 gallon container with a continuous flow spigot and 5 gallon catch bucket</p> <p><input checked="" type="checkbox"/> Soap & paper towels</p> <p>Note: A restroom hand sink cannot be used in place of the hand sink in the booth.</p>	<p>Outside cooking area (May require separate permit)</p> <p><input type="checkbox"/> Outside cooking area (BBQ) must have a second handwash station</p> <p><input checked="" type="checkbox"/> Cover on cooker</p> <p><input type="checkbox"/> 4-foot separation/barrier from public</p>	<p>Food Safety/Hygiene Items</p> <p><input checked="" type="checkbox"/> Thermometer (0-220°F)</p> <p><input checked="" type="checkbox"/> Sanitizer test strips</p> <p><input checked="" type="checkbox"/> Hair restraints/hats</p> <p><input checked="" type="checkbox"/> Clean clothing</p> <p><input checked="" type="checkbox"/> Garbage can(s)</p> <p><input checked="" type="checkbox"/> No young children</p> <p><input checked="" type="checkbox"/> No live animals</p>
<p>Describe Booth Materials</p> <p>Floor: Asphalt</p> <p>Sidewalls: Vinyl Tent Material</p> <p>Ceiling/Overhead: Vinyl Tent Pop-Up</p>	<p>Utensils to Prevent Hand Contact</p> <p><input checked="" type="checkbox"/> Single-use gloves</p> <p><input checked="" type="checkbox"/> Tongs</p> <p><input checked="" type="checkbox"/> Spatula</p> <p><input checked="" type="checkbox"/> Spoon or Fork</p> <p><input type="checkbox"/> Other _____</p> <p><input checked="" type="checkbox"/> Extra utensils in booth</p>	<p>Sanitizer bucket</p> <p><input checked="" type="checkbox"/> Open container</p> <p><input checked="" type="checkbox"/> Additional container for booths with raw meat</p> <p><input checked="" type="checkbox"/> Wiping cloths</p> <p><input checked="" type="checkbox"/> Bleach/Sanitizer (1 tsp bleach/gal. water)</p>

Temporary Hand Washing Station

The hand washing station must consist of a 5-gallon container with a spigot that provides a continuous flow of water, soap, paper towels and a 5-gallon bucket to collect the dirty water. Any Temporary Food Establishment found without adequate hand washing facilities will be closed or required to stop selling or giving away food until the violations are corrected. **A re-inspection is required if the hand washing station is not set up as described, and the permit holder will be assessed a \$100 re-inspection fee. Annual vendors that operate a temporary food business will be closed for the day.**

This will be supplied by UDK.



GENERAL INFORMATION

1. Where will you dump waste water and grease?

UDK will be picking up waste water and disposing of it

2. Do any of your events last for more than one day? Yes No

If yes, where will you store your food and equipment during overnight hours?

3. How will you clean and sanitize food equipment and utensils at your booth?

Sanitize buckets as outlined in the temporary food booth self inspection. All dishes will be washed rinsed & air-dried

4. List the name(s) of workers that hold a food handler card or food manager certificate:
-

5. Prohibited Activities:

- a. Time as a public health control is not allowed at temporary events.
- b. Eating, drinking, or smoking is not allowed in food booths.

Commissary

If your operation does any of the following:

- Operates for more than 45 days in a calendar year
- Requires off-site food preparation prior to the event
- Uses produce that is not purchased pre-washed or pre-cut
- Lacks access to a 3 compartment sink for dishwashing

You must obtain permission to use a kitchen facility (commissary) that is approved by Salt Lake Valley Health Department for advance food preparation, produce washing and dishwashing. Examples may include restaurant, church, school, or community center. The facility must have the ability to support your event menu and any preparation. **A separate permit and inspection are required for your commissary location. You must submit a separate commissary agreement form signed by you and the commissary owner/manager before your permit will be approved.**

(Print name of Commissary)

(Physical address)

(Contact Person at Commissary)

(Commissary Phone #)

Date(s) and Time(s) you will prepare food at the commissary*

Date:	Time:	Date:	Time:	Date:	Time:

You must be at the commissary on the dates and times listed above for inspections. Failure to notify the Health Department of changes in your commissary schedule may result in **follow-up fees and/or **closure of your booth**.*

Please read and initial.

_____ I have read and understand the hand washing station requirements.
Initial

_____ I have received a Temporary Event Food Safety Guide.
Initial

_____ I have received the self-inspection form(s) and understand that I must complete a form on each day of operation.
Initial

_____ I understand the following conditions will warrant immediate closure:
Initial

- * Lack of a current SLVHD permit for each day of operation
-Permits are not transferable between booths or events.
- * Lack of a hand washing station
- * Foods prepared at or brought from home
- * Critical violations and/or imminent health hazards
- * Lack of equipment or capacity to hold potential hazardous foods at required temperatures