

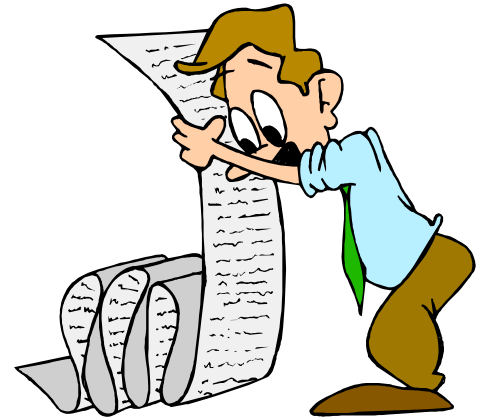


HEALTH CARE AGENCY/PUBLIC HEALTH ENVIRONMENTAL HEALTH

Event Coordinators For Community Events

WHY THIS INFORMATION IS IMPORTANT

Planning a community event is no easy task. Our goal is to ensure your event goes as smooth as possible during the day of the event. The purpose of this informational bulletin is to highlight the health requirements that you as an event coordinator need to know so you can host an event not only easily, but safely as well.



WHAT THIS PACKET CONTAINS- EASY AS 1-2-3!

1. **Event Basics-Safety & Setup Diagrams (page 2):** It just makes good business sense to run a safe operation. We diagramed the basics for you based upon our experience to assist you. It protects your customers, reduces your liability, and ensures your customers will find your event a success.
2. **Permit Application (page 3):** Complete the application for a health permit and submit it with the permit fee at least two weeks prior to your event. You need an approved permit in order to operate. Permit fees are listed on our website <http://ocfoodinfo.com/tff>.
3. **Operations Specifications (page 4):** Tell us about your event. We can then help guide you better through the requirements.

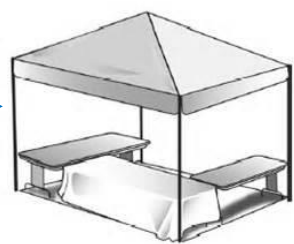
ADDITIONAL INFORMATION

- **Vendor Meetings** An opportunity for us to meet with you and your vendors before to the event where everyone can ask any specific questions. If you are interested in this service, please request this at the time you submit you permit application.
- **Submit this Completed Packet** At least two weeks before the event to allow enough time for evaluation. The completed packet shall include the **permit application, operation specifications, site map, list of all food vendors and permit fee**. The event coordinator packet must be submitted prior to any food booth permit application.
- **Self-Inspection Check List:** At the time of payment, you will be provided self-inspection check lists to distribute to all vendors. This checklist is to be completed the first day of the event to ensure all vendors are in compliance. An electronic version may be requested to be emailed and is available on our website.
- **Give Us a Call** Contact us by phone at **(714) 433-6000** or by email at ehhealth@ochca.com or find more comprehensive details regarding booth and event requirements at: <http://ocfoodinfo.com/tff>

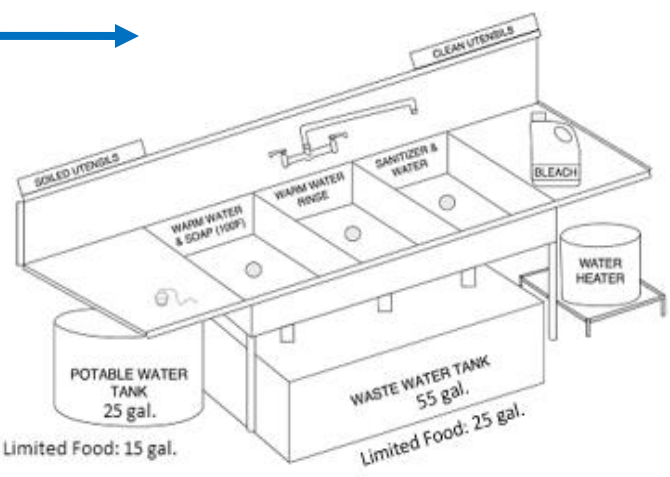
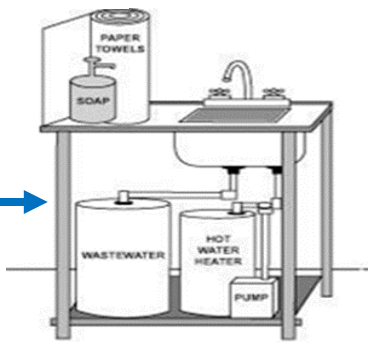
EVENT SET UP BASICS

Site Set Up Requirements

- Restrooms within 200 ft. of all food booths
 - At least 1 toilet per 15 food staff
 - Events 3 days or less
 - Chemical type Toilets allowed
 - Events 4 days or more and recurring events
 - Flushable toilets required
- 1 hand wash station shall be available per restroom facility
 - Events 3 days or less
 - Warm water (100°F) from a pump-type or mechanical hand wash unit is allowed
 - Events 4 days or more and recurring events
 - A mechanical hand wash sink is required with continuous flow of warm water (100°F)
- All non-service animals are at least 20 feet from all food booths
- Shared 3-Compartment Sinks within 100 feet of booths
 (General size of each compartment is 18inx18inx12in)
 - May be shared by no more than 8 booths
 - Needs simple over head protection



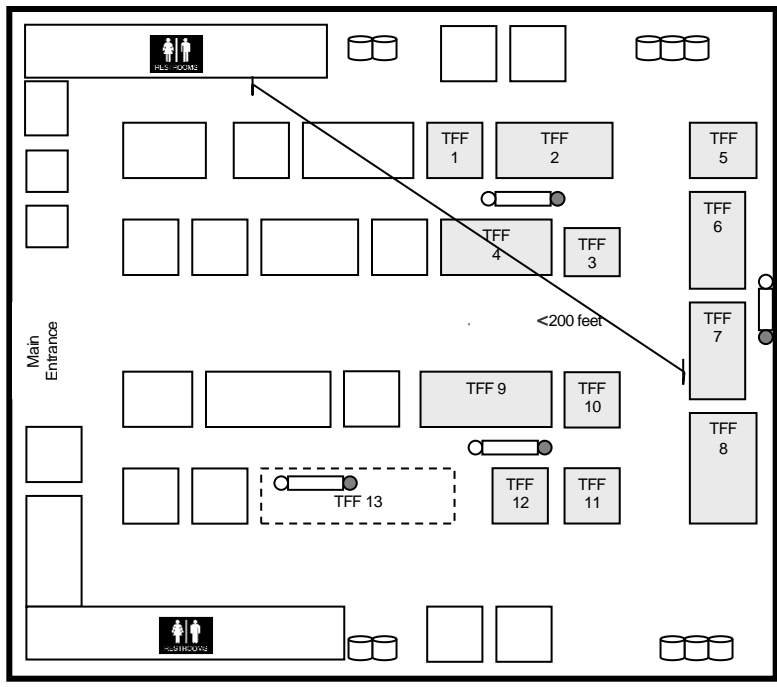
200 feet



Site Plan

- Include:
 - Proposed location and description of food booths and food storage facilities
 - Restrooms and hand wash stations
 - Trash containers
 - Clean water supply and Waste water facilities
 - All shared ware washing (dish/utensil) areas.

EXAMPLE:



LEGEND

- Fresh Water
- Waste Water
- Warewashing Sink
- Refuse Container
- Restrooms and Handwashing Facilities

- TFF 1 Jeff's Pizza
- TFF 2 Juice for Me
- TFF 3 Chip Chip Cookies
- TFF 4 Grandma's BBQ
- TFF 5 Suds N' Spuds
- TFF 6 Taste Best
- TFF 7 Thai Food
- TFF 8 Earth Foods
- TFF 9 Veggie for Ever
- TFF 10 Popcorn Galore
- TFF 11 All Sandwiches
- TFF 12 BBQ Pork & More
- TFF 13 House of Chicken

Note:
1. TFF 13 will provide its own warewashing sink



Orange County Health Care Agency
 Environmental Health Division
 1241 E. Dyer Road, Suite 120, Santa Ana, CA 92705
 Telephone: (714) 433-6000
 Fax: (714) 433-6423
 Web Site: www.ochealthinfo.com

APPLICATION FOR HEALTH PERMIT

TEMPORARY FOOD FACILITY

This Section To Be Completed By Applicant- Please Print – Do Not Detach Operator Copy - Health Permits Are NOT Transferable

| | | | |
|---|---|----------------------------|---|
| Name of Temporary Food Facility (TFF) Event: | | Name of Event Coordinator: | Phone: |
| Event Address: | | | |
| Business Name: | Owner's Name (Authorized Representative): | | Phone: |
| Business Address: | | | |
| Cell Phone: | E-Mail Address: | Fax: | |
| Owner's Mailing Address: | | | |
| Additional Contact: | | Additional Contact Phone: | |
| City approved community event: <input type="checkbox"/> Yes <input type="checkbox"/> No | | Operation Date(s): | Operation Hours: ____ Am/Pm to ____ Am/Pm |
| <i>I Hereby Make Application For A Health Permit And/Or Environmental Health Services</i> | | | |
| Signature: | | | Date: |
| Print Name: | | Title: | |
| Date of Birth: | Driver's License No: | Federal Tax ID: | |

For Office Use Only

| | |
|---|---|
| Permit Approved By (print): | Date: |
| <input type="checkbox"/> Profit Event Coordinator <input type="checkbox"/> Non-Profit Event Coordinator | HSO Receipt Number: |
| Event Frequency: <input type="checkbox"/> Single <input type="checkbox"/> Recurring | Fee Amount: <input type="checkbox"/> Fee Amount Paid <input type="checkbox"/> Fee Amount Unpaid |
| This Permit Is Valid For: _____ | |

Event Coordinator Inspection

Permit Valid Only For A Specific Time Period And Location

- Approved restrooms: Yes No
- Site map/plan provided; Yes No Updated on-site: N/A No Yes
- 3-compartment sink(s) provided with hot water: Yes No N/A
- Reinspection(s) required: Yes No Reinspection date: _____
- Total amount of TFF approved: Profit: _____ Non-Profit: _____ Craven: _____
- NOTES:



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Event Coordinator OPERATION SPECIFICATIONS

Event Name: _____ Event Location: _____

Event Coordinator Name: _____

Phone Number: _____ Email _____

Check the box(s) that explains your operation. More than one answer may apply.

1. Describe your event: (attach additional sheets if necessary)

2. Has your event been approved by the city your event is located?

Yes No

3. When is your event?

START DATE: _____ END DATE: _____ START TIME: _____ END TIME: _____

4. Are you affiliated with a non-profit organization?

Yes, a copy of proof of non-profit status is attached to this application
 No, proceed to **question 6**.

5. As a non-profit, will any of your commercial food booths be donating their proceeds from this event to your organization?

Yes, see our informational bulletin for **Procedures for Exemption of For-Profit Entities giving or selling food for the benefit of a Non-profit**.
 No

6. Will any of your food vendors be from a non-profit organization?

Yes, have all non-profit food vendors complete a **Non-Profit Temporary Food Facility Application**
 No

7. Will any mobile food trucks, carts, or trailers be participating at your event?

Yes, No, proceed to **question 9**

8. Are all participating mobile food trucks, carts, or trailers currently permitted in Orange County by Environmental Health?

Yes, Include a list of all mobile food trucks, carts and trailers with your vendor list.
 No,

Events 3 days or less: Mobile Food Facilities may apply for a **Temporary Food Facility Permit**.

Events 4 days or more: All Mobile Food Facilities must be permitted by our Mobile Food Facility Department.

Have all mobile facilities contact us at **714-433-6416** for more information.

9. Will you be providing shared 3-compartment sinks for your open food vendors?

Yes, see the requirements on **page 2**. No

10. Who will be at the event to help with the set-up, the event and if we have a question?

Name: _____ Contact#: _____

THANK YOU!