



**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 **at least two weeks prior** 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 **least two weeks prior** to the start of the event.

**ANNUAL - Check the appropriate box (A or B)**

- A.** Annual - for-profit low risk booth (max. 500 sq. ft.) operating at each recurring community event or swap meet at a single location with two or more booths with food service limited to commercially prepackaged, nonpotentially hazardous food (nuts, jerky, bottle water, canned soda and similar snacks) and/or whole uncut (not ready to eat) produce - (A person or organization must be designated as an Event Organizer) \$180 [1657]
- B.** Annual - for-profit booth (max. 500 sq. ft.) at each single recurring community event (e.g. popcorn), or swap meet with services limited to nonpotentially hazardous food - \$350 [1656]

**NON-ANNUAL - Check the appropriate box (C or D)**

- C.** Booth operating at a community event with two or more booths (max. 500 sq. ft. each) (A person or organization must be designated as the Event Organizer - requires an Event Organizer Application)
- D.** Single Booth (max. 500 sq. ft.) operating at a community event (e.g., city festival, fair, political or educational event approved by the Health Department)

FOR OFFICE USE ONLY	
Date Rec'd	_____
Rec'd By	_____
Amt Rec'd \$	_____
Check #	_____
Receipt #	_____
Record #	_____
P/E: 16	District _____
FA #	_____
EV #	_____
<b>Bluebook Types:</b>	
<input type="checkbox"/>	Application Late [05]
<input type="checkbox"/>	Exemption Lost / Exceeded Frequently [06]

**Check the appropriate circle (either 1, 2, 3, 4 or 5)**

- 1.** For-profit entity – must be associated with a community event (C or D above) - \$180 [1674]
- 2.** For-profit low risk booth operating at a recurring community event or swap meet at a single location with two or more booths with food service limited to commercially prepackaged, nonpotentially hazardous food (nuts, jerky, bottled water, canned soda and similar snacks – does not include produce). Staff time limited to 30 minutes. - \$84 [1675]
- 3.** A Permitted Food Facility on behalf of a nonprofit organization and no monetary benefit – to the for-profit - does not exceed 3 days in a 90-day period. (*Exemption Request Letter required*) - \$180 (*unless fee is waived – see above conditions*) [1652].
- 4.** Non-profit charitable organization – limited to no more than four times per year for no more than three days in duration - \$180 (*unless fee is waived - see above conditions*) [1677]
- 5.** Non-profit charitable organization serving only nonperishable prepackaged low risk food such as candy or baked goods that are adequately protected from contamination and/or commercially prepackaged- \$84 (*unless fee is waived - see above conditions*) [1678]

**Attachments:**

- 1. Non-profit Charitable Organization: Proof of non-profit status or IRS Exempt Registration # \_\_\_\_\_.
- 2. Exemption Request Letter (*reference B (2) above*)
- 3. Drawing of Temporary Booth Establishment (*Sketch #1*)
- 4. On-site Food Preparation Form (*Attachment A*)
- 5. Off-site Food Preparation Form (*Attachment B*)
- 6. Employee Log Form (*Attachment #C*)

Name of Community Event: Wild West BBQ Bash

Name of Booth/Organization: \_\_\_\_\_

Owner/Contact Person: \_\_\_\_\_ Sponsoring Organization Family Care Network, Inc.

Mailing Address (*Street # / Name/City/Zip*): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Booth Location: \_\_\_\_\_ Priesker Park, Santa Maria 93458

Street Number      Direction      Street Name      City/Town      Zip Code

Date(s) and time(s) the booth will be operating		Date(s) and time(s) booth will be set up and ready for inspection	
Date	Time	Date	Time
1. June 26, 2010	10:00am-4:00pm	1. June 26, 2010	7:00am
2.		2.	
3.		3.	

