



## Temporary Food Facility (TFF) Application

**Deadline:** Signed and completed applications are due **at least two weeks prior** to the start of the event. Permit issuance is at the discretion of Environmental Health Services (EHS) based on timely TFF application submissions and demonstration of ability to safely conduct the TFF operation.

**Non-Profits:** Application fees 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' duration, per event**. Non-profit organizations applying for fee waiver must submit proof of non-profit status and a completed, signed application to EHS at **least two weeks prior** to the start of the event. If Booth is run or sponsored by a non-profit organization, provide IRS non-profit registration number here: \_\_\_\_\_.

**Event Name:** \_\_\_\_\_

**Location of Event / Venue Address:** \_\_\_\_\_

**Booth Name:** \_\_\_\_\_

**Booth Manager/Owner/Operator/Organization:** \_\_\_\_\_

**Booth Contact Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
Street City/State Zip

**Primary Phone:** \_\_\_\_\_ **Alternate Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**For Department Use Only**

Date Rec'd \_\_\_\_\_

Rec'd by: \_\_\_\_\_

Amt.Rec'd: \_\_\_\_\_

Check#: \_\_\_\_\_

Receipt#: \_\_\_\_\_

PE: \_\_\_\_\_ TE: \_\_\_\_\_

FA Venue: \_\_\_\_\_

FA Vendor: \_\_\_\_\_

PR Vendor: \_\_\_\_\_

BO Number: \_\_\_\_\_

### Booth Operation Date and Time

Indicate the date(s) and hour(s) of booth operation. If you need more space, include a separate sheet.

Date(s)	Operating Hour(s)	Time that Booth Will Be Ready for Inspection

### Type of Food/Beverage to be Served at Booth:

Check all that apply.

- Individually prepackaged, non-perishable food (commercially prepackaged, individual portions of shelf-stable foods like chips, cookies, candy bars, whole uncut produce, and canned soda) – no open food
- Individually prepackaged perishable food (e.g., ice cream bars or pre-made, fully-wrapped sandwiches)
- Individually prepackaged food with sampling
- Open food preparation, portioning or service (including pouring coffee, tea or water)

### Menu and Food Preparation

List all the foods/beverages being served by this booth at this event. **Please include all condiments, seasoning and garnishes. Only menu items approved by EHS, in advance, may be served at the event. Attach additional menu/sheets as necessary.**


## Food/Beverage Source and Preparation

1. Where are you getting the food/beverages/ice that is being prepared and served at this event? List specific stores or wholesalers: \_\_\_\_\_
2. Where will each food/beverage item be prepared? \_\_\_\_\_  
*Note: If you plan to use a location other than the event to prepare food/beverages in advance, please provide a current, valid health permit for that facility and describe what will happen at that location. **If the off-site facility is owned by a third party, please attach the permit AND the off-site food preparation authorization form to this application.***

## Food Temperatures and Thermometers

1. How will you keep frozen, cold or hot foods at a safe temperature during transportation to your food booth? How long will transport time be? \_\_\_\_\_  
*Perishable foods must be kept cold (45°F or below) or hot (135°F or above) at all times, including during transportation.*
  2. How will you keep perishable hot and cold foods at a safe temperature at your booth during the event? Be specific: \_\_\_\_\_
  3. Indicate the person responsible for checking food temperatures at the booth: \_\_\_\_\_
  4. How often will food temperatures be checked? (minimum: at least every 2 hours) \_\_\_\_\_
  5. How will you sanitize your probe thermometer? (see TFF guidelines) \_\_\_\_\_  
*Food booth operators must use a probe thermometer to check food temperatures during the event. Thermometers must be sanitized before and after food contact.*
- I agree to discard or destroy any perishable food that is not below 41°F or above 135°F.  
*At the end of each operating day, destroy or discard all hot perishable foods held at or above 135°F as well as all cold perishable foods held between 41°F and 45°F.*

## Hand Washing:

Proper and regular hand washing is one of the single most important actions you can take to prevent foodborne illness. Each booth with open food/beverage must have an individual hand washing station inside the booth. This station must have at least 5 gallons of warm water (100°F minimum), 7.5 gallons of wastewater capacity, with dispensed soap and single use paper towels in dispensers.

Indicate the type of hand washing station at your booth:

- Plumbed sink with hot & cold water                       Gravity hand-washing setup with hands-free spigot
- Prepackaged food only with no sampling; no hand washing required (*hand washing stations still strongly recommended*)                       Other; please describe: \_\_\_\_\_

## Utensils:

All multi-use utensils (knives, cutting boards, scoops, etc.) used in a booth must be washed, rinsed and sanitized between tasks, between types of food, and at least every 4 hours. Will multi-use utensils be used at your booth?  
 Yes       No

<b>Utensil Washing Sink Requirements:</b>	
<b>For-Profit Booth Operators</b>	<b>Non-Profit Booth Operators:</b>
3-compartment sink w/integrated drain-boards and hot (120°F) & cold running water under pressure provided by: <input type="checkbox"/> Prepackaged food/no utensils/no sink required <input type="checkbox"/> Booth operator ( <i>attach rental agreement or picture of unit, if owned by Booth operator</i> ) <input type="checkbox"/> Event organizer <input type="checkbox"/> Share fully plumbed 3-compartment sink with another booth at event. Name of other Booth: _____	3-compartment sink OR alternative 3-basin system with hot water (120°F or higher) provided by: <input type="checkbox"/> Prepackaged food/no utensils/no sink required <input type="checkbox"/> Booth operator <input type="checkbox"/> Event organizer <input type="checkbox"/> Share fully plumbed 3-compartment sink with another booth at event. Name of other Booth: _____ How you will heat hot water to wash utensils? _____

## **Sanitizing Solution:**

What type of sanitizer will be used for utensil washing and/or to sanitize surfaces? (check all that apply):

- Chlorine (100 ppm)       Quaternary Ammonium (200 ppm)       Other: \_\_\_\_\_

*All booths must have appropriate test strips to check sanitizer levels.*

## **Water and Wastewater:**

1. What water source will you use for this event? \_\_\_\_\_  
*Water used in Temporary Food Facilities (for handwashing, utensil washing, and food preparation) must be potable (drinking water) and stored/dispensed from labeled food-grade containers and/or hoses.*

2. How will you store and dispense water? (minimum 20 gallons per booth, per day)  
\_\_\_\_\_

3. How will you dispose of wastewater at this event?  
\_\_\_\_\_

*All wastewater (water from hand washing, utensil washing, and melted ice water) must be disposed of in a sanitary sewer.*

## **Booth Construction:**

Food preparation and service booths must have four walls, a cleanable floor (such as asphalt, concrete, tight wood or other approved flooring), and waterproof overhead protection (no umbrellas permitted). Serving windows may be a maximum of 216 square inches (i.e. 12x18 inches) separated by at least 18 inches. Booths serving only prepackaged food/beverages require a cleanable floor and overhead protection. Food and utensils must be stored at least 6 inches above the ground.

***Booth diagram must be attached to this application.***

1. Indicate the Booth's construction materials:

Floor material: \_\_\_\_\_ Wall material: \_\_\_\_\_

Ceiling material: \_\_\_\_\_ Size of pass-through windows: \_\_\_\_\_

2. How will electricity be provided to the Booth (*include available amperage and your equipment's electrical demands*): \_\_\_\_\_

3. Please add any additional information about your Booth that should be considered (*such as fire prevention considerations*): \_\_\_\_\_

## **Booth Categories**

Check the box that best describes your booth(s). Associated fees can be found in the [TFF Guidelines and Fee Schedule](#).

<input type="checkbox"/> For-profit booth(s) offering non-perishable, commercially individually prepackaged and labeled food/beverages and/or whole uncut produce (may include limited sampling upon approval) (PE 1675)
<input type="checkbox"/> Non-profit booth(s) offering non-perishable, commercially individually prepackaged and labeled food/beverages and/or whole uncut produce (may include limited sampling upon approval) (PE 1678). Fee waived if completed application is received by EHS at least two weeks prior to event.
<input type="checkbox"/> For profit booth(s) and fundraising activities not sponsored by a verified non-profit organization offering open or perishable foods (including commercially individually prepackaged perishable foods and poured beverages) (PE 1674) example of fundraising would be medical or death benefits.
<input type="checkbox"/> Non-profit booth(s) offering open or perishable foods, including poured beverages (PE 1677). Fee waived if completed application is received by EHS at least two weeks prior to the event.
<input type="checkbox"/> Annual TFF food service limited to non-potentially hazardous food at a recurring swap meet or community event at a single location.
<input type="checkbox"/> Annual TFF with low risk limited to commercially <b>prepackaged</b> , non-potentially hazardous food and/or whole uncut produce at a recurring swap meet or community event at a single location.

## Required Attachments:

Only complete applications will be processed by EHS. Complete applications include the following:

<input type="checkbox"/> Booth diagram	<input type="checkbox"/> Proof of non-profit status, if applicable (IRS/state tax-exempt organization letter or non-profit tax ID#)
<input type="checkbox"/> Employee log	<input type="checkbox"/> Current, valid copy of California Food Handler's card OR proof of other approved food handler training for at least one Booth worker per shift.
<input type="checkbox"/> Off-site food preparation authorization form. If food will be stored or prepared at another location during or prior to this event, include a photocopy of the current health permit or CA Processed Food Registration (PFR) for the off-site preparation location.	

## Certification and Signature of Responsible Party:

I hereby certify that the above information is complete and correct. Failure to complete any portion of this application may result in denial of a health permit. I fully understand that any changes from the application submitted above without prior permission from EHS may result in denial of a permit to operate a booth at this event.

**Submission of an application is not a permit to operate until additional steps are completed and authorization is given.** I understand approval of these plans and specifications by EHS does **not** encompass compliance with any other code, law or regulation that may be required (i.e., federal, state, or local). Furthermore, it does not constitute endorsement or acceptance of the completed temporary food facility (booth structure or equipment).

I also understand a pre-opening inspection of the facility may be conducted and the inspection will include equipment being in place and operational.

I understand that I may not operate this booth at this event until I have received written permission to do so from EHS.

A manually signed copy of this application delivered by facsimile, email, or other electronic transmission shall be deemed to have the same legal effect as delivery of an original signed copy of this application.

Signature(s) must be Booth Operator who agrees to remain on-site during the event as the person responsible to ensure proper booth set up and safe food handling among all volunteers and/or employees.

_____ <b>Print Name</b>	_____ <b>Signature</b>	_____ <b>Date</b>
_____ <b>Print Name</b>	_____ <b>Signature</b>	_____ <b>Date</b>

### FOR OFFICE USE ONLY

Approved  Disapproval By: \_\_\_\_\_ Date \_\_\_\_\_

Temporary Food Facility Permit Effective Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Permit Restrictions \_\_\_\_\_

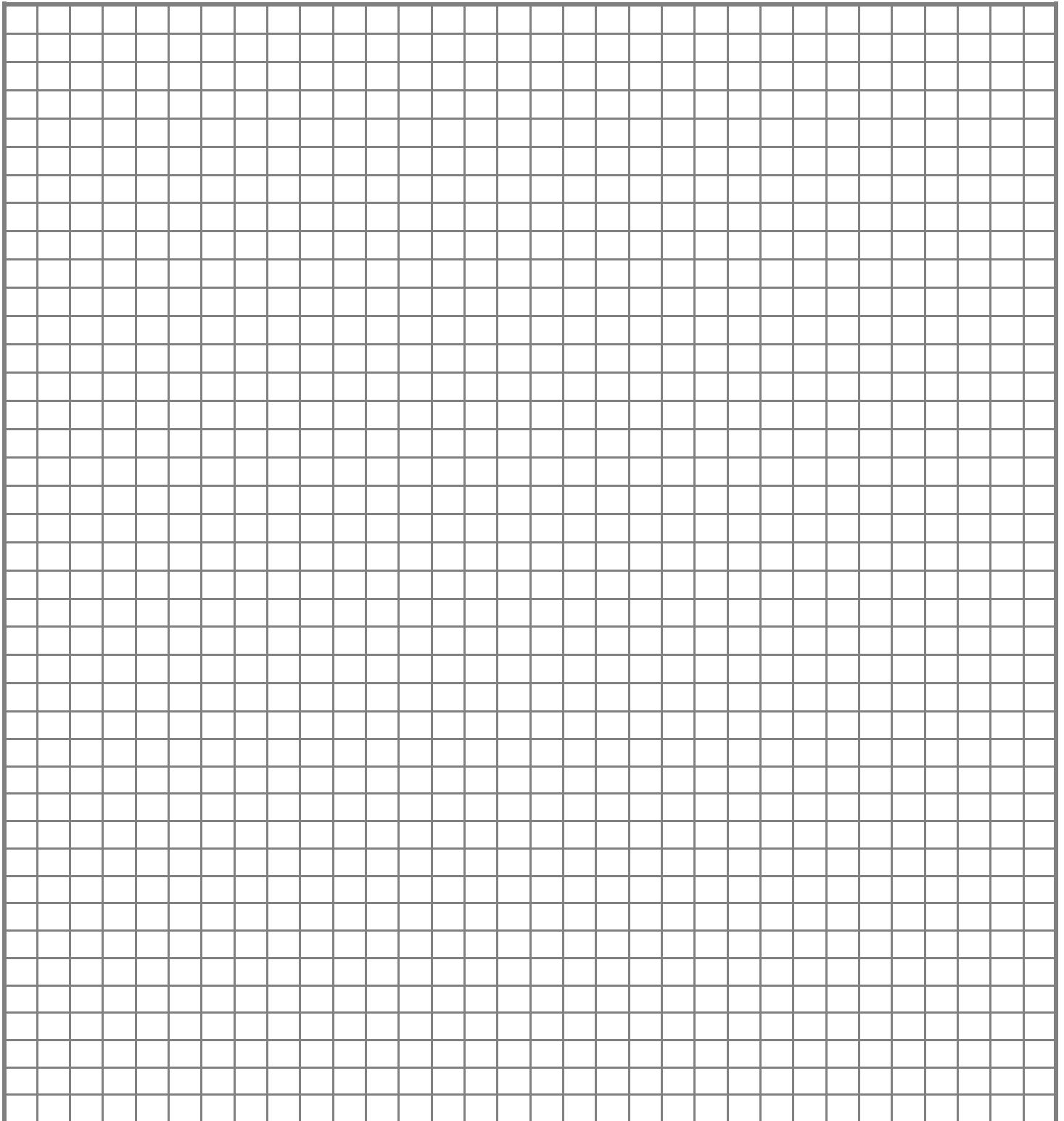
Reason(s) for Disapproval: \_\_\_\_\_

# Booth Diagram (Sketch Sheet)

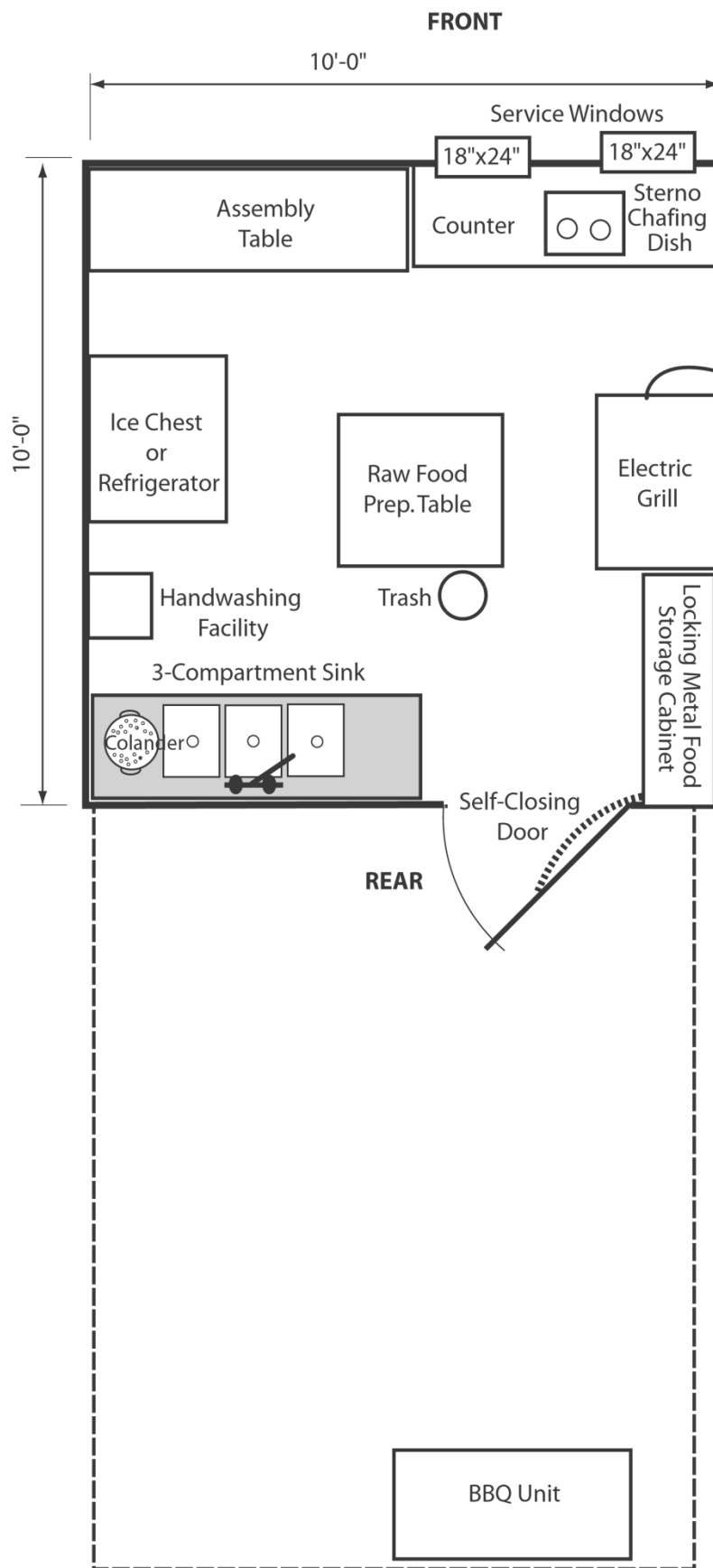
## Drawing of Temporary Food Booth

Name of Booth: \_\_\_\_\_

In the following space, provide a drawing of the Temporary Food Booth. Identify and describe all equipment including cooking and cold holding equipment, handwashing facilities, work tables, dishwashing facilities, food and single service storage, garbage containers, and customer service areas.



# 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

FOOD	THAW How? Where?	Cut / Wash Assemble Where?	Cold Holding How? Where?	Cook How? Where?	Hot Holding How? Where?	Reheating How?	Commercial Pre-Portioned Package
<i>Marinated chicken</i>	<i>Fresh</i>	<i>Restaurant</i>	<i>In coolers on ice</i>	<i>BBQ at event to</i>	<i>Sterno chafing</i>	<i>If below 140 °F it will</i>	<i>N/A</i>
<i>pieces</i>	<i>see form B</i>		<i>transported from</i>	<i>165 °F.</i>	<i>dishes with lids at</i>	<i>be thrown away.</i>	
			<i>restaurant at</i>		<i>least 140 °F</i>		

## **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

<i>FOOD</i>	<i>THAW How? Where?</i>	<i>Cut / Wash Assemble Where?</i>	<b>Cold Holding</b> How? Where?	<i>Cook How? Where?</i>	<i>Hot Holding How? Where?</i>	<i>Reheating How?</i>	<b>Commercial Pre-Portioned Package</b>
<i>BBQ marinated</i>	<i>bought</i>	<i>Rinsed &amp;</i>	<i>Arranged on</i>	<i>Transported in</i>	<i>none</i>	<i>none</i>	<i>none</i>
<i>chicken pieces</i>	<i>Fresh from Albertsons</i>	<i>Placed in 5 Qt. plastic</i>	<i>Baking sheets in restaurant</i>	<i>bags on ice in cooler.</i>			



# 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 "✓" by the name. Attach a copy of the food safety training certification if the person(s) completed the training by a recognized provider of food safety training.

NAME	DATE	ASSIGNMENT	TIME IN	TIME OUT