

Ventura County Environmental Health Division 800 S. Victoria Ave., Ventura 93009-1730 Telephone: 805-654-2813 Fax: 805-654-2480 rma.venturacounty.gov/divisions/environmental-health

FOR	OFFICE USE ONLY
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COMMUNITY EVENT ORGANIZER APPLICATION

All Event Applications must be submitted by the Event Organizer at least 30 days before the event.

Event Name:			New 🗌 🛚	Repeat 🗌			
Event Location:	Ad	ddress:					
Operating Dates &Times:			If season or series, attach	schedule.			
Organization promoting event:							
Organizer Mailing Address:							
Organizer Contact Name:							
Cell phone:							
Alternate Contact:							
TEMPORARY FOOD FACILITY (TFF) Centre the Ventura County EHD Temporary operation of the event. Signature:	Food Facility class and	d will be present an	d available during the event to en	•			
		FEES					
			tach appropriate documentation. rson must be present during the eve	nt.**			
Number of days operating:	Number of TFFs:		Number of Annual TFFs:	Fee Due (Fee waiver requirements on page 3)			
□ 1 □ 2 □ 3 □ 4* □ 5*	TFF-1 (open food and/or PHF)		TFF-1 Annual				
Season/Series* (Attach Schedule)	TFF-2 (prepackaged non-PHF)		TFF-2 Annual				
	(Attach TFF application per booth)		(Attach copy of annual permit)				
*Handwash sinks with pressurized warm (100°F)/cold water are required at TFFs when events last cumulatively 4 days or more. Initials of Event Organizer:	Ventura County CFOs (Attach copy of annual permit)		Ventura Co. MFFs				
			(Attach copy most recent inspect report) Out of County MFFs won't be approved as a TFF.				
	UTENSIL WASHING S						
	Approved flooring and						
3-Compartment Warewash Sink w/ pi		Liquid Waste Removal Provided by (pick an option):					
(120°F) and cold water provided by (p		_ = '	tors (skip questions below) <u>OR</u>				
TFF Operators (skip questions below)Event OrganizerPrepackaged food only. (Warewash sink not required)		Event Organizer					
Organizer Provided Warewash Sink I	nformation: (Number	of sinks:)	(If more than one sink, attach list of	 ΓFFs per sink #)			
Note: Only food grade hoses are approve							
Potable Water Supply: Water tank OR Connected to an unlimited drink		Removal Company:	oosal:				
City of:		Address: City: Phone: Frequency of service:					
(If unlimited water supply, provide minim	num 250-gallon waste						
tank per sink or connection to public sani		OR Connected to public sanitary sewer City of					
Type of sanitizer solution with test str	rips: Chlorine C	Quaternary Ammoniu	um Other:				
	401 ETE 4001104T1011	CARRIE NOT BE 100	CENTER				

$\label{thm:county} \textbf{VENTURA COUNTY ENVIRONMENTAL HEALTH DIVISION} \\ \textbf{rma.venturacounty.gov/environmental-health/program/consumer-food-protection/forms} \\$

LIST	OF PARTICIPATIN			ACILITII	ES (TFFs)			
		ore than <mark>10,</mark> atta MPLETED BY O		<u> </u>			HD STAFF	
Business name	Operator name	Telephone	Annual TFFs only Facility ID # FA00*****		If sharing Organizer Ware-wash Sink, "indicate Sink #"	PE	OMPLETE Fee Due	
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								
	TICIPATING VENT							
These are vehicles permitte	ALL SECTIONS 1					e templ	ate.	
Business name	ss name License Plate Number		Last Inspection Date		Operator Name	Telephone #		
1.	*Required	MM-D	D-YY					
2.								
3.								
4.								
5.								
	· · · · · · · · · · · · · · · · · · ·				PERATORS (CFOs)			
These are home based food o	perations registe D BE COMPLETED	-		tura Co	unty. If more than 3	3, attach	a list.	
Business name	Facility ID # FA00*****	Operato		ame Telephone #				
1.	1 A00							
2.								
3.								
	E	LECTRICAL PO	WER		1			
Is Organizer providing electrical power to each If the even			vent is scheduled for more than one day, will the TFF(s) have continuous ity to power refrigerator(s) overnight? Yes No NA NA					
		CILITIES FOR FO			·			
Must k	e within 200 ft. of al	I TFFs and MFFs. I	Requires 1 p	er 15 foo	d handlers.			
Number of Toilets:	Number o	Number of Hand Washing Facilities for Toilets:						

VENTURA COUNTY ENVIRONMENTAL HEALTH DIVISION rma.venturacounty.gov/environmental-health/program/consumer-food-protection/forms

TEMPORARY FOOD FACILITY CONSTRUCTION
Food preparation and service booths must be fully enclosed with 4 sides, a cleanable floor (asphalt, concrete, plywood, or tarp*) and overhead protection. The booth may have a maximum of two (2) windows no larger than 216 square inches (e.g., 12 X 18 inches) each, separated by at least 18 inches. Prepackaged food booths require overhead protection. If food booth is located on dirt, approved flooring is required.
*Wood is required under cooking equipment. Plastic tarp is not approved flooring for beverage booths.
Provided by: TFF Operators (skip questions below) OR Event Organizer
Floor Material: Wall Material:
Ceiling Material: Size of Pass-through Windows:
ANIMAL AREAS
Will there be animal areas? Yes No If Yes, specify: Petting zoo Pony rides Other
If there will be animal areas at the event, EHD recommends hand washing facilities equipped with running water, soap, and single-use paper towels in permanently mounted dispensers be located at the exit of the animal areas. Post signage directing people exiting the animal areas to wash their hands.
Animal areas must be located at least 20 feet from any TFF and should not be upwind from any TFF or eating area.
I have completed the application to the best of my ability. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of permit, and/or citation. I understand that once the application is submitted the application fee is non-refundable. I also understand that if I submit the application with a missing or expired TFF training certificate or without required Nonprofit Charitable Status documents, no fee reduction will be given and full fee is due. Application completed by:
Print Name: Signature: Cell Phone:
Important:
Attach Site Plan of Event that includes location of: Temporary Food Facilities; Mobile Food Facilities; Cottage Food Operators; toilet & hand washing facilities; Organizer-provided warewashing sinks; potable water source, wastewater disposal, electrical power, and trash receptacles.
Ensure all sections of this application are complete before submitting. All required documents must accompany application when it is submitted. Additional TFF Applications will not be accepted after Organizer Application has been submitted.
Fee Waiver Checklist:
Application packet submittal at least 30 days before event.
Attach copy of <u>valid EHD TFF certificate</u> , valid through the event. Must sign page one. If expired, pay fee indicated.
Proof of nonprofit status:
Attach copy of California Franchise Tax Board Entity Status Letter 23701 d. If not currently exempt 23701 d, pay fee.

Please take a moment to provide feedback.

An opinion form can be completed at http://www.vcrma.org/envhealth/hawd.html.



Attach copy of IRS <u>Letter of Designation</u> 501 (c) (1-10).