

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**

Submitted 30 days before event ____

Rcd By_

Check #_

Date ____ Amt Rcd

See Instructions/Fee Schedule on website for current fee.

TEMPORARY FOOD FACILITY TYPE 1 OPERATOR (TFF-1) APPLICATION

FOR OPEN AND/OR POTENTIALLY HAZARDOUS FOOD, INCLUDING OPEN SAMPLING

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

Facility Name (Vendor):		Verified by		
Manager/Owner/Operator:		nded TFF Class: Y N		
Event Name:				
Event Location:				
Operating Dates/Times:	Time TFF will be ready for inspecti	on:		
TFF Mailing Address:	City:	Zip:		
Telephone: Fax:	E-mail:			
TFF Onsite Contact(s):	Cell Phone(s):			
FEES Consult Instructions/Fee Schedule on Environmental Health Division (EHD) website for current fee. Attach appropriate documentation.				
Number of days operating: 1 2 3 Series (Attach Schedule) Certified Farmers' Mark		Fee Due (Subtract waiver if applicable):		
For Profit (Attach Fee) Veteran (Attach Proof of Honorable Discharge, ie: DD214) Non-Profit Charitable (Attach Proof) Ventura EHD TFF Food Handler Certificate attached. ** TFF Certified person must be present during hours of operation. **				
FOOD OPERATION TYPE				
☐ Prepackaged PHF (Potentially Hazardous Food) ☐ Food Preparation/Service ☐ Prepackaged with sampling				
Have you participated in a previous community event in Ventura County? Yes No				
PART A: FOOD TO BE SOLD OR SERVED AT THE EVENT Food preparation shall be completed either in the temporary food facility after permit inspection or at a permitted/EHD approved food facility.				
List all food offered from the TFF. Specify "prepackaged" or '	"open."			
FOOD PREPARATION/STORAGE AT OTHER LOCATION AND TRANSPORTATION All food preparation or storage must be in a permitted or EHD approved facility. Identify any facility where advance preparation (or food storage) will take place. A letter from the permit-holder must be submitted for food preparation at a permitted food facility.				
Will food be prepared in advance? Yes $\ \square$ No $\ \square$	Will food be stored in advance?	Yes No		
Name of Facility:	Phone Num	ber:		
Address of Facility: Copy of permit attached.				
Method of food temperature control used during transportation:				
SAMPLING				
If handling prepackaged food, will you offer samples? Yes No Prepackaged samples Open samples Describe method of sampling				
PART B: HOT/COLD HOLDING EQUIPMENT Identify methods of maintaining food hot or cold during hours of operation.				

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Cold Holding:	☐ Mechanical Refrigerator	☐ Ice Chest ☐ Cold Table ☐ N/A		
	Other:		_	
At the end of each operati	ing day, discard or destroy all potentially h	azardous food that was not held in a refrigerator holding at or below 41°F	F.	
Hot Holding:	Steam Table	Chafing Dishes Soup Warmer/Crock Pot		
□ N/A	☐ Hot Holding Cabinet ☐	Hot Dog Roller Grill		
	Other (Specify):		_	
At the end of each operati	ing day, discard or destroy all potentially h	azardous food that was held at or above 135°F.		
How will food temper	atures be monitored at the event?	Probe thermometer Ambient thermometer		
PART C: EQUIPMENT/UTENSILS USED				
Will multi-use utensils (knives, scoops, spatulas, bowls, etc.) be used inside the booth for food preparation?				
	UTENSIL WASHIN	G SINK REQUIREMENTS		
3-Compartment Utensil Washing Sink with hot (120°F)		Provide 3-Compartment Utensil Sink Information.		
and cold running wate	er under pressure provided by:	Water tank size: gallons		
Event Organizer (s	kip remainder of section)	Connected to drinking water supply with backflow		
TFF Operator (complete information below, including sanitizer information)		prevention device (provide verification of source)		
·	only: No 3-compartment sink required.	Wastewater Tank Size: gallons		
		Source of potable water:		
Liquid Waste Remova	l Provided by:	r Waste Tank Size: gallons		
Event Organizer	City of	Waste Removal Company		
Provide Address of location	n where liquid waste will be disposed of:			
	SANITIZ	ING SOLUTION		
Provide informat	tion about the type of sanitizer to b	e used in 3-compartment sink and/or to sanitize surfaces.		
Sanitizer type: Chlori	ne Quaternary Ammonium	Other:		
En		e available at TFF and used to test solution.		
	HAND WA	SHING FACILITIES		
Hand Washing Facilities	with minimum 5 gallons potable, warr	m water and 7.5 gallons waste capacity tanks provided within booth	1:	
Permanent, plumbe	d sink Gravity hand washing so	et-up Prepackaged food only. No hand washing required.		
Portable sink with water/waste tanks and heater for 100°F water (Required at events more than 3 days long and at CFM)				
NOTE: Gravity hand wash is not approved for Certified Farmers' Market (CFM) operation or for events lasting more than 3 days.				
PART D: FOOD BOOTH CONSTRUCTION				
Food preparation and service booths must have 4 sides, a cleanable floor (eg: asphalt, concrete, tarp, plywood) and overhead protection. The booth may have serving windows that are no larger than 216 square inches each, separated by at least 18 inches. Prepackaged food booths require cleanable floor or grass, and overhead protection. If food booth is located on dirt, approved flooring is required. Plastic tarp is not approved flooring for TFF dispensing beverages. Food and utensils must be 6" above ground.				
Floor Material:	Floor Material: Wall Material:			
Ceiling Material: Size of Pass-through Windows:				
TEMPORARY FOOD FACILITY TYPE: Food Booth (Tent) Beverage Truck Permanent Structure (eg: Snackbar)				
	PART E: CERTIFICATION			
I have completed the application to the best of my ability. I understand that I may be asked to provide additional information in				

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

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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 if the TFF certified person is not present during hours of operation, no fee waiver will be given and full fee is due.			
Application completed by:			
Print Name:	Signature:	Telephone:	
PART F: SKETCH OF BOOTH LAYOUT Include location of cooking equipment, hand washing facilities, food and utensil/equipment storage, utensil washing facilities, outside condiment storage and open-air BBQ (if applicable), and trash.			
		Example Legend	
		HW Gravity hand washing	
		Hs Hand washing sink	
		3-compartment sink	
		Trash	
		Be sure to identify each item you draw.	