

620 South 400 East #400 **St. George**, UT 84770 435-673-3528 260 East DL Sargent Dr. **Cedar City**, UT 84721 435-586-2437 445 North Main **Kanab**, UT 84741 435-644-2537 PO Box 374, 601 East Center **Panguitch**, UT 84759 435-676-8800 PO Box G, 75 W. 1175 N. **Beaver**, UT 84713 435-438-2482 swuhealth.org

Temporary Food Establishment Permit Application

Establishment Information				
Establishment Name:	Owner Name:			
Mailing Address:	City/State/Zip:			
Email Address:	Phone Number:			
Commissary Information (Licensed Commercial Kit	tchen)			
Commissary Name:	Commissary Owner:			
Commissary Address:	City/State/Zip:			
Permitting Health Dept.:	Commissary Phone Number:			
Single Event Information (Seasonal TFE Permits: Li	ist additional events onSheet provided)			
Name of Event:	Date(s) of Event:			
Event Organizer:	Event Organizer Phone:			
Event Location:	Event Hours:			
Event/Seasonal	Permit(Select One)			
Single Event				
After this application has been completed for the current ca notifying the Southwest Utah Public Health Department of event. Permit fees are located on the last page of this applic	ly once per year, unless changes to the application are requested. Alendar year a new permit for each event may be obtained by the intent to attend the event and paying the permit fee for the ration. A late fee will be assessed each time a permit is issued at Permit may exceed 14 days and a new permit must be obtained			
🗆 Seasonal (6 month)				
new application is required for each calendar year of opera SIMPLE FOODS -No TCS food, ALL workers shall have food SHAVED ICE –Must have hand wash and 3-compartment si and wastewater storage tank capacity. Single serve ice crea FOODS WILL BE ALLOWED. ALL workers shall have food ha FARMERS MARKET (Repeat Event at Single Location opera -No more than five(5) TCS Foods, No reheating or cooling o	handler permits.(popcorn, cotton candy, roasted nuts, etc.) nk, hot water heater, adequate culinary water storage tank(s), and and sweetened condensed milk are allowed NO OTHER TCS andler permits. ates 1-2 days per week at same approved location ONLY.) f foods, ALL workers shall have food handler permits. att, A current Certified Food Safety Manager required, No reheating			

Seasonal Temporary Food Establishment Event List

- Please list the Southwest Utah Public Health District public events you plan to operate at with this permit.
- If you decide to add events later, please resubmit this page with the new events listed.
- You are required to notify the Southwest Utah Public Health Department of additional events at least 72 hours in advance.

Event Information					
Name of Event:	Date(s) of Event:				
Event Organizer:	Event Organizer Phone:				
Event Location:	Event Hours:				
Name of Event:	Date(s) of Event:				
Event Organizer:	Event Organizer Phone:				
Event Location:	Event Hours:				
Name of Event:	Date(s) of Event:				
Event Organizer:	Event Organizer Phone:				
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Event Location:	Event Hours:				
Name of Event:	Date(s) of Event:				
Event Organizer:	Event Organizer Phone:				
Event Location:	Event Hours:				

Make copies of this sheet as needed

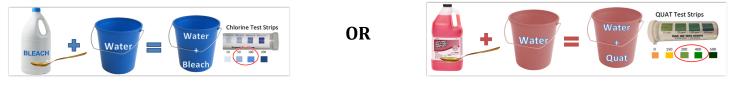
Food Preparation and Storage

All food preparation and storage must take place at the approved event or at a permitted food facility. If food is prepared off-site, a copy of the commissary's permit must be submitted with this TFE application.

Will food be prepared off-site? \Box Yes \Box No Where will food be purchased?

Cleaning & Sanitizing

A Sanitizer is required to clean dishes and food contact/food preparation surfaces during the event. Test strips must be available for the sanitizer being used to ensure appropriate concentrations (chlorine bleach = 100 ppm and quaternary ammonia = 150-400 ppm – follow manufacturer's recommendations). *Identify which sanitizer will be used at the event*.



□ Chlorine Bleach □ Quaternary Ammonium

Menu

Only food items listed below will be approved to serve. All food must be prepared on-site or at a permitted facility **List all prepared foods, beverages, and condiments that will be served. Use additional forms as needed. Menu changes require a new application.**

Menu	Ingredient(s)	Check all that apply					
Item		N/A	Pre- packaged	Assembly	Portioning	Cooking	Other (specify)
Example: Hamburgers	Hamburger patty, cheese, lettuce, onion, tomatoes, pickles						

Hot/Cold Holding Equipment

Identify methods that will be used to maintain food hot or cold during hours of operation. Check all that apply.

Cold Holding \Box Mechanical Refrigeration \Box Ice Chest \Box Cold Table \Box N/A \Box Other (Specify)

Hot Holding □ Steam Table □ Chafing Dishes □ Electric Soup Warmer □ Hot Holding Cabinet □ Hot Dog Roller Grill □ Electric Rice Cooker □ N/A □ Other (Specify) _____

Food Protection

Required Protection: • Overhead Protection • Protection from the Public • Dust Control measures as needed.

□ Protection from contamination (Ex. Sneeze Guards) □ Pre-Packaged Food & Drinks □ Stored six (6) inches off the floor

 \square Covered Dishes \square Prepared Away from Customers \square Protected During Storage

 \square N/A \square Other (Specify) _

Equipment/Utensils Requirements

- All eating and drinking utensils given to the public must be disposable.
- All utensils and equipment must be washed, rinsed and sanitized before use.
- A dishwashing setup is required for all Temporary Food Establishment's (TFE) operating at events lasting longer than four (4) hours unless there are sufficient replacement utensils brought to the event

Sink Requirements



Hand Wash Setup

A hand wash station is required for all TFEs

• Operating without a complete hand wash station will result in closure of your booth if not corrected immediately.

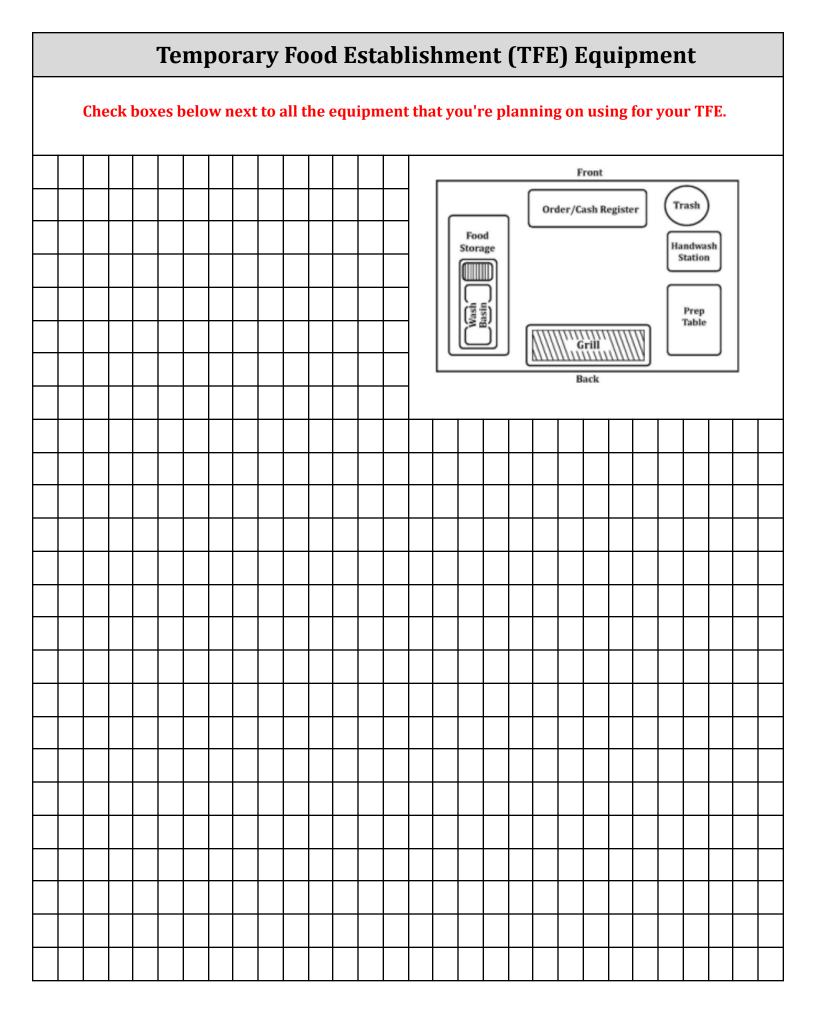
A complete hand wash station requires:

- Liquid Soap
- Paper Towels
- Five (5) Gallon Clean Water Minimum with Continuous Flow Spigot
- Five (5) Gallon Discard Bucket

Dishwashing Setup (check all that apply; select at least one) If sufficient replacement utensils cannot be provided OR For dishes that must be washed during the event, one of the following sink requirements must be met.

- Permanently Plumbed Sink
- Self-Contained Portable Sink
- Three (3) compartment/Container Sink
- Pre-Packaged Food Only
- Extra Utensils Provided (cleaned and sanitized at commissary)
- Disposable Utensils Used





Final Review

Initial next to the statements below, indicating that you understand and will abide by them.

- 1. A hand wash station with dispensed soap, paper towels and a continuous or (hands-free) spigot is required to be set up for use prior to beginning any food preparation and must be maintained throughout the event. ESTABLISHMENT WILL BE CLOSED IF OPERATING WITHOUT A PROPERLY SETUP HAND WASH STATION
- 2. Bare hand contact with any ready-to-eat food item is not allowed.
- 3. All Time and Temperature Control for Safety (TCS) foods held cold shall be held at or below 41°F, including transport. All TCS foods held hot shall be held at 135°F or higher at all times. FOODS REQUIRING TEMPERATURE CONTROL MUST BE DISCARDED IF HELD IN THE TEMPERATURE DANGER ZONE.
- 4. The establishment must have at least one person present with proof of a valid food handler permit.
- 5. All garbage must be contained in leak-proof containers and properly disposed of.
- 6. Wastewater must be dumped into the public sewer system. Wastewater includes all liquid waste such as wash water, ice melt. Wastewater may not be discharged onto the ground, into storm drains, or waterways.
- 7. Potable water must be used for all establishment operations. Hoses used for obtaining potable water must be food grade and dedicated to that use only. ESTABLISHMENT WILL BE CLOSED IF OPERATING WITHOUT POTABLE WATER
- 8. All food must be obtained from an approved source.
- 9. Garbage and refuse containers must be provided in the booth. They must be lined with plastic bags, and disposal frequency must be adequate to prevent spillage or nuisance.
- 10. All food must be prepared on-site, or at a permitted food establishment/commissary.
- 11. The permit to operate must be posted in public view.
- 12. I understand the following conditions will warrant immediate closure:
 - Lack of a valid permit.
 - Lack of a properly set up handwash station.
 - Foods prepared at home.
 - Imminent health hazards and/or gross negligence.
 - Presence of animals in food preperation areas
 - Lack of equipment or capacity to hold foods under proper temperature control.
 - Lack of potable water.
 - Lack of sanitizer for surface cleaning and dishwashing if applicable.



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Temporary Food Establishment Review

Establishment Information

Establishment Name:

Conditions of Permit

I hereby certify that all information provided is correct, and I fully understand that any deviation, without approval from the Southwest Utah Public Health Department Environmental Health Sciences Division, may result in the suspension of any permit issued. I understand that compliance with all rules and regulations, as defined in the Utah Code R392-100 (Food Service Sanitation) is a requirement for obtaining and maintaining a permit in Southwest Utah Public Health District. The permit is only valid for the public events and the inclusive dates listed on it. The Environmental Health Sciences Division can make additional requirements as necessary.

Applicant Name (Print): _____

Applicant Signature: _____ Date and Time: _____

Event Permit(s)(Select One	2)	Seasonal Permit (Select One)						
🗆 Single Event – Tier/Risk 1	\$ 50	□ Seasonal (6 month) – Tier/Risk 1	\$ 100					
□ Single Event – Tier/Risk 2	\$ 70	□Seasonal (6 month) – Tier/Risk 2	\$ 140					
Number of events:		Number of booths to permit for simultaneous events:						
Event(s) Total	\$	Seasonal Total	\$					
		Total Payment Due	\$					
Modified Risk Assessment (Office Use Only)								
1. Does the establishment prepare, store, o meat?	r serve any raw	□ Yes ⇔Tier/Risk 2 □ No Proceed to 2						
2. Does the establishment prepare, store, o more TCS (Time and temperature control f foods?		□ Yes ⇔Tier/Risk 2 □ No ⇔Tier/Risk 1						
Payment Information (Office Use Only)		Received By Initials:						
Permitted on-site +\$25								
Date Paid: Amount Paid: \$ Permit No								