**WESTPORT WESTON HEALTH DISTRICT**
180 Bayberry Lane, Westport, CT 06880-2855
*Telephone: (203) 227-9571 Fax: (203) 221-7199*

**PACKET A**

**All Fees are non-refundable**
**FEE: $165 Hot Foods**
**$55 Cold Foods**

# Application
# To Operate a Temporary Food Service Booth

**Name of Organization:** _____

**Street Address:** _____

**Town, State, Zip:** _____

## Details of Event:

Name of Event: _____

Date(s) of Event: _____ Anticipated Attendance (Total) _____

Hours of Operation: _____

Hours of Food Service: _____

Location of Event: _____

Food Booth QFO _____ Telephone: (_____) _____

**Telephone: (_____) _____ Fax: (_____) _____**

**E-Mail Address:** _____

**Permittee/operator:** _____

**Directions:**
The operator of each Temporary Food Event site or booth must complete this application. The application must be completed and submitted with payment to the WWHD at least 14 days before the event.

In addition to the information requested above, each operator must complete and return Attachments 1 and 2.

*For Office Use Only*

| Date Application Approved: | Date Permit Issued: | Date Mailed/Delivered |
|---|---|---|
| By: | By: | By: |

**Notes/Conditions:**

**Please fill in the information below:**

1. Using Attachment 1 - Draw the location and identify all equipment including handwashing facilities, dishwashing or utensil washing facilities, ranges, refrigerator, hot and cold holding equipment, worktables, food/single service storage, grills, etc.

2. Using Attachment 2 ï Menu Plan, list all food and beverage items to be prepared and served and/or sampled. (NOTE: Any changes to the menu must be submitted to and approved by the Westport Weston Health District at least 10 days prior to the event.)

3. Will all foods be prepared at the Temporary Food Event or Booth site?

   ____ Yes ____ No

   If you answered no above and the facility is not licensed in Westport or Weston , provide a copy of the current license for the food establishment where the food will be prepared.

4. Describe (be specific) how food will be transported and protected during transportation to the event and how product temperatures will be properly maintained:

   _____

   _____

   _____

5. Describe how food will be stored at event (minimum of 12 inches off ground).

   _____

   _____

   _____

6. Describe how temperatures of hot and cold foods will be monitored during the event.

   _____

   _____

   _____

7. Describe your set-up for hand washing.

   _____

   _____

   _____

8. Describe where and how cleaning and sanitizing of utensils, cuttings boards, and other food contact surfaces will take place. Also describe provisions for backup utensils (sanitized test strips must be available).

   _____

   _____

   _____

9. Please add any additional information about your event or Booth that should be considered.

_____

_____

_____

_____

10. Using Attachment 3 ï ñEmployee Volunteer Sign-in Sheet,ò record the names, phone numbers, shifts to be worked during the event and the assigned duties of all Temporary Food workers (paid and volunteer).

Statement: I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior permission from the WWHD may nullify approval.

Signature (s)_____

Signature _____ Date _____

*For Office Use Only*

Approval of these plans and specifications by the Westport Weston Health District does not indicate compliance with any other code, law or regulations that may be required (i.e., federal, state, or local). Furthermore, it does not constitute endorsement or acceptance of the structure or equipment. A preopening inspection, with equipment in place and operational, will be necessary to determine if it complies with the local and state laws governing temporary food service establishments.

☐ **APPROVAL** ☐ **DISAPPROVAL** **Effective Date:** _____

Permit Conditions & Restrictions or Reasons for Denial:

_____

_____

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_____

**Reviewer Signature and Title:** _____ **Date:** _____

## Attachment 1: Food Booth Sketch

Draw the location and identify all equipment including handwashing facilities, dishwashing or utensil washing facilities, ranges, refrigerator, hot and cold holding equipment, worktables, food/single service storage, grills, etc.

**Describe food booth, including walls, flooring, screening, counter materials, and lighting.**

## Attachment 2: *Menu Plan and Food Preparation Summary*

1. List all menu items and the ingredients for each menu item (see example below). Highlight potentially hazardous items, including meat, fish, eggs, poultry, cut melon, cooked rice or macaroni, baked potatoes, butter, milk, cheese, or other dairy products, tofu, sprouts, garlic in oil mixtures, or any food containing these ingredients. Include beverages and ice if it will be an ingredient in foods or beverages.
2. List the source (where it will be purchased and when).

| Menu items/ingredients (Describe: canned, frozen, fresh, form) | Source (Where purchased) | Date Purchased | Frozen or Fresh | Prepared Where & How | Holding Cold or Hot |
|---|---|---|---|---|---|
| **Example:** | | | | | |
| **Baked Potatoes w/cheese** | | | | | |
| **Fresh Idaho potatoes** | **JB's food warehouse** | **8/10/01** | | | |
| **Cheese Whiz Sauce** | **JB's food warehouse** | **8/10/01** | | | |
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| Menu items/ingredients (Describe: canned, frozen, fresh, form) | Source (Where purchased) | Date Purchased | Frozen or Fresh | Prepared Where & How | Holding Cold or Hot |
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**Attachment 3: Food Preparation at Licensed Permanent Food Establishment.**

| Food | Thaw<br>How?<br>Where? | Cut/Wash/<br>Assemble<br>Where? | Cold Holding<br>How?<br>Where? | Cook<br>How?<br>Where? | Hot Holding<br>How?<br>Where? | Reheating<br>How? | Commercial<br>Pre-portioned<br>Package |
|---|---|---|---|---|---|---|---|
| ***Example:***<br>Chicken<br>Breasts | In refrigerator<br>At catering<br>Kitchen | --- | --- | Grill to 165ƺ F<br>At catering<br>Kitchen | On booth in<br>Steam table | On grill at<br>booth | |
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**Attachment 4: Food Preparation at Temporary Event Booth.**

| Food | Thaw<br>How?<br>Where? | Cut/Wash/<br>Assemble<br>Where? | Cold Holding<br>How?<br>Where? | Cook<br>How?<br>Where? | Hot Holding<br>How?<br>Where? | Reheating<br>How? | Commercial<br>Pre-portioned<br>Package |
|---|---|---|---|---|---|---|---|
| ***Example:***<br>Hot Dogs | --- | --- | In refrigerator<br>At booth | On grill | Cooked to order only | --- | --- |
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## Attachment 5: Temporary Food Event - Employee/Volunteer List and Sign-in Sheet

Event Name:_____

Name of Booth/Vendor: _____

| *Date* | *Name (Please Print)* | *Phone No.* | *Time In* | *Time Out* |
|---|---|---|---|---|
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*The applicant is responsible for maintaining a complete and current list, including addresses and phone numbers, of employees and volunteers working at each food booth and at any off site kitchens. Failure to comply with this regulation may result in revocation of the food permit.

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**TEMPORARY FOOD SERVICE FACILITY**

## Attachment 6: Sampling Sheet

List all sampling items and the ingredients for the sampling items. List the items that will be used to sample product: i.e., crackers, chips, pretzel sticks. (Remember: a maximum of 10 items can be sampled.)

| Item to be sampled | Source (where purchased) | Date to be purchased |
|---|---|---|
| **Example: Onion dip; dried soup mix, sour cream will be sampled with pretzel sticks.** | **BJ's Warehouse** | **August 10, 2001** |
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