

Pender County Health Department

...Building a healthier tomorrow...

Carolyn Moser, MPA
Health Director

Temporary Food Event Vendor Application

This application must be completed and submitted to the Pender County Health Department (PCHD) to provide information about all food preparation and sales to the public at any public event or exhibition within Pender County. Applications must be submitted no later than 15 days prior to the event. Please note:

- A detailed drawing of your food stand and equipment to be used.
- A fee of \$75.00 will be required for each food service permit and must be paid with the submission of each Food Vendor Application.
- Completed checklist (see attached Temporary Food Event Vendor Checklist).

NOTICE: (All Food Vendors Must be set up and ready for inspection the day before the scheduled event)

Name of the Event: _____ Date of the Event: _____

Address of the Event: _____ NC
Street City State Zip

Name of Vendor: _____

Vendor Phone: _____ Vendor Email: _____

Vendor Address: _____
Street City State Zip

Date/Time of Food Booth Set Up & Permitting: _____

**** Please note: Food booth must be completely set up prior to permitting and NO food preparation is allowed in the booth until the permit is issued****


*If you are a permitted Mobile Food Unit, please include a copy of your Mobile Food Unit Permit with this application. Permitted MFU's are not required to fill out checklist or pay the \$75.00 fee.

*If you are requesting (Non-Profit) status, please include your NC Department of Revenue Tax Exempt Number below.

Tax ID Number: _____

(Non-profit food vendors are not required to receive a permit from the PCHD, as long as, food is served for no more than 2 consecutive days, once a month only.)

I certify that the information in this application is complete and accurate. I understand that any changes to my operation must be submitted to the Pender County Health Department for review and approval prior to the day of the event.

 Vendor Signature: _____ Date: _____

**Submit this application, all Food Vendor Applications, permit fee(s), and event map to:
Pender County Health Department
803 South Walker Street, Burgaw, NC 28425
Phone: (910) 259-1233**

803 S. Walker St., Burgaw, NC 28425 (910) 259-1230 Fax (910) 259-1258

Dental Center (910) 259-1503 Environmental Health (910) 259-1233 WIC (910) 259-1290

Pender County Health Department

...Building a healthier tomorrow...

Carolyn Moser, MPA
Health Director

Temporary Food Event Vendor Application

- 1) Will vendor prepare food prior to the event? Yes No
If you checked "yes," food will be prepared prior to the event, provide the name of the facility where food will be prepared:

Commissary/Prep Facility Name: _____

Address of Commissary: _____
Street City State Zip

Date/Time of Preparation: _____

**Please Note: Advanced preparation may require a permit by the Pender County Health Department for the commissary/preparation facility.*

- 2) As of September 1, 2012, the vendor/permit holder shall require all food service employees to comply with an approved Employee Health Policy. Do you have an approved Employee Health Policy? Yes No

- 3) Source of water for Food Vendors: (**Check the one which applies for all vendors**)
 Public water supplied by organizer (requires food grade hose) Tap water supplied by vendor
 On-site private well (requires sampling by PCHD) Bottled water supplied by vendor

- 4) Check the box that best describes the disposal method for the following:
- | | | |
|---|---|--|
| <u>Garbage:</u> | <u>Wastewater:</u> | <u>Grease:</u> |
| <input type="checkbox"/> Waste bin taken off-site | <input type="checkbox"/> Portable toilet at event | <input type="checkbox"/> Grease taken off-site |
| <input type="checkbox"/> Event Dumpster | <input type="checkbox"/> Event gray water bin | <input type="checkbox"/> Event grease receptacle |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ |

- 5) Check the box that best describes your equipment:
- | | | | |
|--|---|---|--|
| <u>Cold Holding:</u> | <u>Hot Holding:</u> | <u>Utensil Washing:</u> | <u>Hand Washing Set-up:</u> |
| <input type="checkbox"/> Refrigeration Truck | <input type="checkbox"/> Chafing dishes | <input type="checkbox"/> 3 Utility sinks | <input type="checkbox"/> Mechanical sink |
| <input type="checkbox"/> Commercial Refrigerator | <input type="checkbox"/> Electrical hot box | <input type="checkbox"/> 3-Compartment sink | <input type="checkbox"/> Gravity flow set-up |
| <input type="checkbox"/> Freezer | <input type="checkbox"/> Grill | <input type="checkbox"/> 3 Basins | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ | |

- 6) Will ready-to-eat produce (vegetables or fruit) be prepared in your food booth? Yes No

- 7) Check the box which describes your food booth set up:
 3-sided tent Tent with fans Mobile food unit Other: _____

803 S. Walker St., Burgaw, NC 28425 (910) 259-1230 Fax (910) 259-1258

Dental Center (910) 259-1503 Environmental Health (910) 259-1233 WIC (910) 259-1290

Pender County Health Department

...Building a healthier tomorrow...

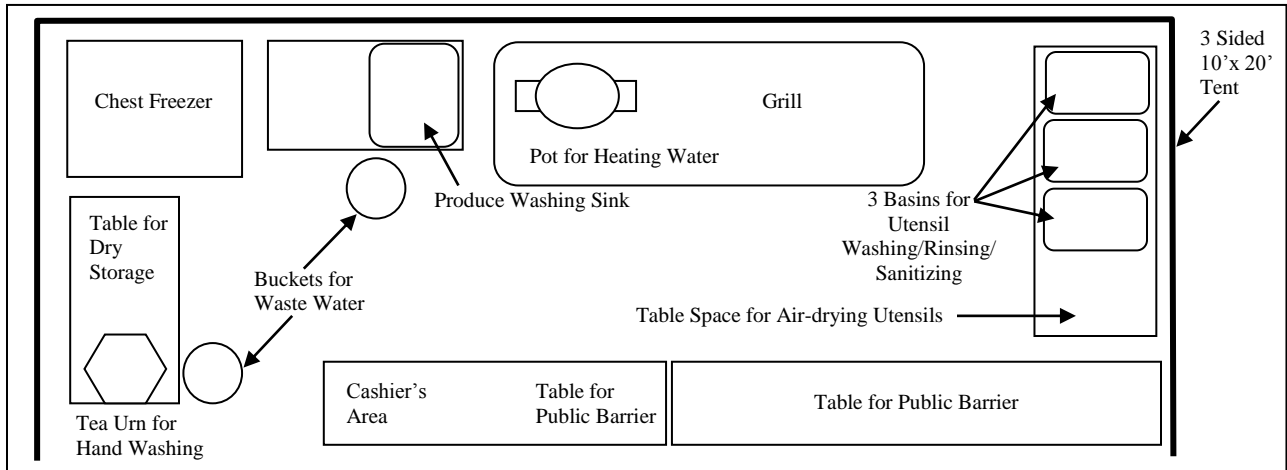
Carolyn Moser, MPA
Health Director

- 8) Provide a complete list of all food/menu items in the chart below and check “Advanced Preparation” if the food/menu item will be prepared prior to the event or check “Prepared at Event” if no advance preparation is needed. Check both “Advanced Preparation” and “Prepared at Event” if food/menu item requires both types of preparation. Please include all add-on items, such as lettuce, tomato, onion, ect.

Food/Menu Items	Advanced Preparation*	Prepared at Event
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

*Please note: food preparation may not exceed more than 7 days prior to the event.

- 9) Find the following example of a typical food booth set-up. Please note that ALL food booths must have approved hand wash set-up and utensil washing set-up for washing, rinsing, and sanitizing equipment. Other equipment needs may vary.



I certify that the information in this application is complete and accurate. I understand that:

- Any changes to my operation must be submitted to the Pender County Health Department for review and approval prior to the day of the event.
- All potentially hazardous food (PHF) that I am serving must be maintained by approved temperatures (45°F or below for cold hold and 135°F or above for hot food) during transport, holding, and/or service.
- Failure to maintain approved temperatures for PHF may result in disposal or embargo of the food.

Applicant Signature: _____ Date: _____

Submit this application, all Food Vendor Applications, permit fee(s), and event map to:
Pender County Health Department
803 South Walker Street, Burgaw, NC 28425
Phone: (910) 259-1233

803 S. Walker St., Burgaw, NC 28425 (910) 259-1230 Fax (910) 259-1258

Dental Center (910) 259-1503 Environmental Health (910) 259-1233 WIC (910) 259-1290