



SUTTER COUNTY

DEVELOPMENT SERVICES DEPARTMENT

Building Inspection
Code Enforcement

Planning
Environmental Health

Fire Services
Engineering

Road Maintenance
Water Resources

FEE:
\$47.00 CASH OR CHECK
IF CASH IT MUST BE THE
EXACT AMOUNT.

NON-PROFIT:
NO FEE WITH
STATEMENT OF
NON-PROFIT STATUS

Temporary Food Facility Application

Community Events

VETERANS:
NO FEE WITH PROOF
OF VETERAN STATUS

Name of Concession

Name of Owner/Operator

Email Address

Mailing Address

Daytime Contact Phone Number

City State Zip

APPLICATION AND FEE MUST BE SUBMITTED TWO WEEKS PRIOR TO EVENT TO:

Sutter County Environmental Health
1130 Civic Center Boulevard, Suite A
Yuba City, CA 95993

Live Oak Festival, Annette Bertolini, Chairman

Live Oak District Chamber of Commerce

Name of Event
Memorial Park, Live Oak CA

Name of Event Organizer
September 15, 2018

Location of Event

Date(s) of Event

NO HOME FOOD PREPARATION OR STORAGE IS ALLOWED

Food served at Community Events must be prepared on-site at the event or in a commercial kitchen.
EXCEPTION: Non-profit charitable organizations may prepare non-potentially hazardous foods in a private home.

Food Prepared Off-Site	Food Storage
Name of kitchen facility:	When and where food is purchased:
Kitchen facility address:	Where food is stored prior to event:
Kitchen facility phone number:	Where extra food is stored at end of day (two or more day event):

Complete the following table for each food item you plan to serve (attach additional pages if needed)

Food or beverage item:	Food or beverage item:
How food is cooked:	How food is cooked:
How food is held at proper temperature:	How food is held at proper temperature:
Food or beverage item:	Food or beverage item:
How food is cooked:	How food is cooked:
How food is held at proper temperature:	How food is held at proper temperature:

Reheating previously cooked/prepared food requires prior authorization from Environmental Health

The following facilities/equipment will be provided as required and described in the Sutter County Environmental Health Department Temporary Food Facility Requirements:

Check all that apply.

- | | | |
|---|--|--|
| <input type="checkbox"/> Approved food dispenser(s) | <input type="checkbox"/> Sanitizing solution and test strips | <input type="checkbox"/> Toilets with handwashing facility |
| <input type="checkbox"/> Hot and cold food holding unit(s) | <input type="checkbox"/> Handwashing facility w/100°F water | <input type="checkbox"/> Garbage receptacle |
| <input type="checkbox"/> Probe thermometer (0°F-220°F) | <input type="checkbox"/> Potable water | <input type="checkbox"/> Utensil sink with hot water |
| <input type="checkbox"/> Disposable food service gloves | <input type="checkbox"/> Fully screened fly proof booth | <input type="checkbox"/> Overhead protection |
| <input type="checkbox"/> Sanitary commercial cutting board(s) | <input type="checkbox"/> Floor covering material | <input type="checkbox"/> Utensil washing dishpans |
| <input type="checkbox"/> Liquid waste receptacle | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ |

I have read and understand the "Temporary Food Facility Food Booth Requirements and Procedures" handout and will fully comply with them.

Signature of Applicant

Date

Approved by R.E.H.S.

Date

This application, once approved, represents your permit to operate as a Temporary Food Facility and must be posted within your booth.

Receipt Number:	Check Number:	Date:	Received By:
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Veterans (No fee with proof of Veteran status)

Non-Profit (No fee with statement of Non-Profit Status)