Stanislaus County

COMMUNITY EVENT ORGANIZER PERMIT APPLICATION

Please make sure writing is as clear as possible. An illegible application may result in a delay or denial of permit.

COMMUNITY EVENT INFORMATION

Name of Community Event

Address of Community Event

City   State   Zip

Event Date(s)   Starting Date   Ending Date

Operation Times   :   to   :   Number of Food Booths

ORGANIZER INFORMATION

Name of Organization

Phone   (   )   -   E-mail / Fax:

Mailing Address

City   State   Zip

Billing Address

City   State   Zip

Event Contact Person

Phone   (   )   -   E-mail / Fax:

SUBMIT THE FOLLOWING AT LEAST TWO (2) WEEKS PRIOR TO THE EVENT

❑ **Application**
Submit a complete organizer application packet at least two weeks prior to the event.
❑ **Payment for the event**
The event organizer will be billed following the event based on the number of booths approved to operate.
❑ **Site Plan**
Provide a complete site plan indicating the location of all food vendors, water supply faucets, waste water disposal, garbage containers, restrooms, refrigerated/frozen storage units, and janitorial facilities. Site plan does not have to be drawn to scale, but must be accurate and include distance measurements.
❑ **Food Vendor List**
Complete and submit the attached food vendor list for review. Make copies/add sheets as necessary.
❑ **Event Utilities**

Is potable water from an approved source available/supplied for each food vendor?	☐ Yes	☐ No	#
Are permanent bathrooms available for food workers?	☐ Yes	☐ No	#
Is electricity supplied/available for each food vendor?	☐ Yes	☐ No	#
Are janitorial facilities available?	☐ Yes	☐ No	#
Are portable toilets provided for customer use?	☐ Yes	☐ No	#

Name of portable toilet company: _____   Number of toilets provided: # _____

Name of garbage disposal company: _____   Number of dumpsters: # _____

Method of disposal of liquid waste for food booths: _____

As the event coordinator for the above event, I have read and understand the Temporary Food Facility requirements as specified in the California Retail Food Code and as described in Environmental Health policies and guidelines.

Event Contact Person: _____   Date: _____

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COMMUNITY EVENT FOOD VENDOR LIST

Please make sure writing is as clear as possible. An illegible application may result in a delay or denial of a permit.

Event Name _____ **Number of Food Vendors** _____

✓ Vehicles – If the vendor is a vehicle, it must be permitted by this Department prior to any operation.
✓ Include ALL food vendors, i.e. vendors that provide only beverages (alcoholic or non-alcoholic) and vendors that perform product demonstrations and/or food sampling, must be included for review and approval.

Assigned Number on Site Plan	Booth / Vehicle Name	Business Name	Main Food Item (1)	Office Use

As the Contact Person for the above event, I have read and understand the Temporary Food Facility requirements as specified in the California Retail Food Code and as described in Environmental Health policies and guidelines.

Event Contact Person (Print): _____ Title: _____

Event Contact Person (Signature): _____ Date: _____

Stanislaus County

FOOD VENDOR SITE PLAN

Provide a diagram of the layout of the event indicating the following:

- ❑ Food Vendors (identify each vendor)
- ❑ Roads (provide names)
- ❑ Restrooms
- ❑ Water Source

- ❑ Refrigerated/Frozen Storage Units
- ❑ Janitorial Facilities
- ❑ Garbage Areas
- ❑ Other _____

EVENT NAME: EVENT DATE(S):

N ⬆

Note – This diagram does not have to be drawn to scale, but accurate, linear distance measurements shall be provided.

| **FV** | Food Vendor as listed | **G** | Garbage Area | **W** | Water Source |

| **RR** | Restroom Facilities | | | **REF** | Refrigeration/Freezer |

DEPARTMENT OF ENVIRONMENTAL RESOURCES
3800 Cornucopia Way, Suite C, Modesto, CA 95358-9492
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www.stancounty.com

SAMPLE SITE PLAN

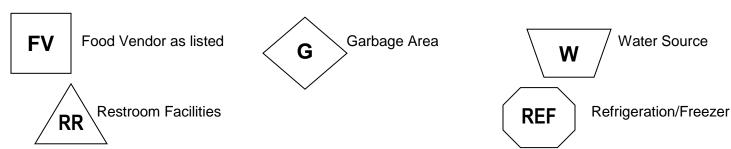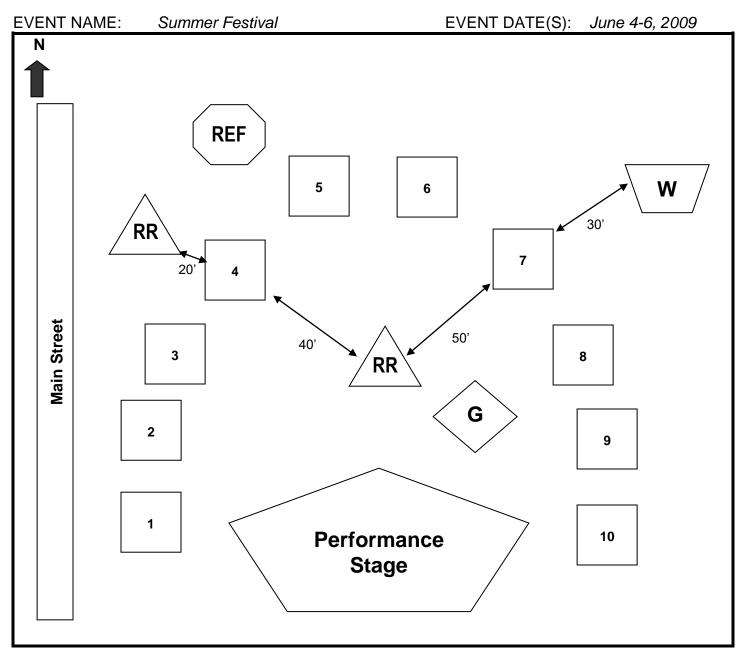## Provide a diagram of the layout of the event indicating the following:

- ❑ Food Vendors (identify each vendor)
- ❑ Roads (provide name)
- ❑ Restrooms
- ❑ Refrigerated/Frozen Storage Units

- ❑ Janitorial Facilities
- ❑ Garbage Areas
- ❑ Water Source
- ❑ Other (see below)

EVENT NAME: *Summer Festival*   EVENT DATE(S):   *June 4-6, 2009*

N

REF

5

6

W

30'

RR

20'

4

7

Main Street

3

40'

RR

50'

8

2

G

9

1

Performance Stage

10

Note – This diagram does not have to be drawn to scale, but accurate, linear distance measurements shall be provided.

FV Food Vendor as listed

G Garbage Area

W Water Source

RR Restroom Facilities

REF Refrigeration/Freezer