



Instructions

1. Complete this application.
2. Return application pages 1- 6, including attachments 1-4, \$75.00 fee⁺, and any additional information, at least 15 days prior to the event (substitutions are allowed up to 3 days prior to event).
3. Complete page 7 and make it available at the event. Use the Evaluation Checklist on page 8 as a guide for setting up your TFE (Attachments 5 & 6).

Date Rec'd. _____
 Fee Paid _____
 Initials _____

APPLICATION FOR
 TEMPORARY FOOD ESTABLISHMENT (TFE) or
 TFE Commissary

You are advised to consult the NC .2600 Rules and Food Code at <http://ehs.ncpublichealth.com/rules.htm>
 You are responsible for all requirements.

Event Information

Event Name: _____ Event Location: _____
 Event Coordinator: _____ Event Coordinator Phone: _____
 Mailing Address: _____ City State Zip: _____
 Date(s) of Event: _____ Booth/Vendor Operation Hours: _____

Vendor Information TFE TFE Commissary (for approval of off-site preparation)

Organization/Business Name: _____ Name of Permittee: _____
 Mailing Address: _____ City State Zip: _____
 Pre-Event Phone: _____ During Event Phone: _____ Email: _____
 Space / Booth Number: _____ Date / Time TFE will be set up: _____

Employee / Volunteer Worker Information (Complete Attachment 4)

Name of Person in Charge to ensure compliance about disease reporting: _____

Food Security

Describe how the food will be secured at all times to prevent tampering and contamination (e.g., locked in trailer/cabinet/cooler when staff not present): _____

Food Service Information

- Where will the food preparation be done?
 - Completely on-site during the event (Complete Attachments 1, 2, 3&5)
 - Off-site prior to or during the event (Complete Attachments 1, 2, 3, 4&5)
 - Describe how frozen, cold, and hot foods will be transported to the event: _____
-
- Will your site have electricity? Yes No Generator? Yes No
 - Describe how your garbage will be collected and disposed: _____

⁺ All Fees Are Established by the State and Subject To Change at Any Time

- Describe how your wastewater will be collected and disposed
 - Collected by Event Coordinator / Organizer
 - Collected by TFE and taken off-site to an approved wastewater disposal system

Describe method: _____

Name of wastewater disposal system: _____

- Other: describe: _____

- Describe the source of the potable water you will use at the event: _____
 - Potable Water Holding Tanks* Connect on-site to public water supply using approved food grade/potable water hose**
 - Total Gallons: _____

* Prior to the event, all water holding tanks are to be emptied, washed, rinsed and sanitized, prior to filling with water on-site. You must have a day's worth of potable water present at the time the permit is issued. You may only bring water to the event if you are a permitted mobile food unit and water is obtained from your base supply. All other vendors must obtain water from the approved supply available at the event or purchase sealed, bottled water from a plant inspected by the NCDA/USDA/FDA or, if the plant is in another state, that state's appropriate agency.

** Connection to approved sewage disposal system required.

- Are you preparing and selling non-potentially hazardous foods ONLY? (for example, funnel cakes, cotton candy, candy apples, popcorn and hand-dipped ice cream) No Yes
- Are you operating from a mobile food unit with a valid permit from a local health department located in North Carolina? No Yes – Which County? _____
(must return daily to commissary to obtain waiver of TFE permit and fee)
- Will you receive a permit from the Department of Agriculture for this event? No Yes
- Is your organization incorporated as a non-profit corporation in accordance with Chapter 55 of the General Statutes, exempt from federal income tax under the Internal Revenue Code as defined in G.S. 105-228.90 or a political committee as defined in G.S. 163-278.6(14)? No Yes – ATTACH supporting information

IF YES IS ANSWERED FOR ANY QUESTION, THE FEE MAY BE WAIVED. Some vendors may be exempt from obtaining a TFE permit, but are still requested to complete this application. Additional information may be required before the waiver can be determined.

(Non-profit vendors may prepare/sell food for up to two consecutive days per month to receive the waiver of TFE permit and fee)

NOTE THAT THIS APPLICATION AND APPROPRIATE FEES MUST BE RECEIVED IN THE OFFICE PRIOR TO THE EVENT, THEY CANNOT BE COLLECTED AT THE EVENT.

Location & date of event where organization last prepared/sold food: _____

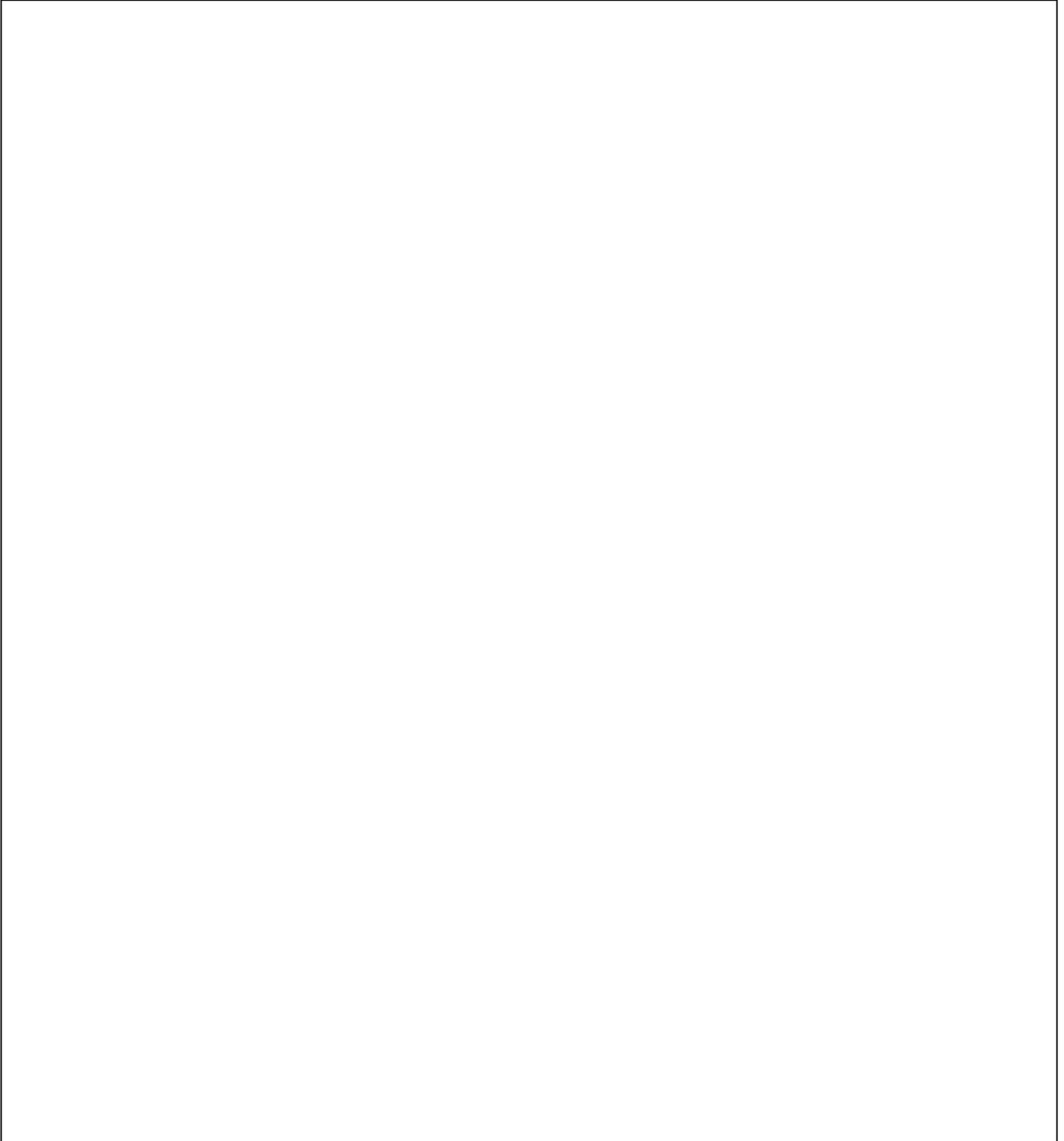
Next planned location or event to prepare/sell food: _____

I hereby certify that the information in this application is correct. I fully understand that any deviation from the information submitted without prior approval from the local health department may nullify final approval.

Applicants Signature: _____ Date: _____

ATTACHMENT 1: Temporary Food Establishment Sketch

In the following space provide a drawing of your food service area. Identify and describe all equipment including cooking, hot holding and cold holding equipment, handwashing facilities, work tables, dishwashing facilities, single service article storage, garbage containers and customer service areas.

A large, empty rectangular box with a thin black border, intended for a hand-drawn sketch of a temporary food service area. The box occupies most of the page below the instructions.

ATTACHMENT 3: Temporary Food Establishment Food Equipment List

(All food vendors and commissaries must complete this chart)

If you are doing the following,	then describe the equipment to be used	<u>Equipment / Utensils</u> <u>Minimum Standards</u> <u>(see complete requirements in 4-1& 4-2NC Food Code)</u>	<u>Cleaning</u> <u>Minimum Standards</u> <u>(see complete requirements in 4-5, 4-6& 4-7 NC Food Code)</u>
Cold Hold <input type="checkbox"/> not applicable (less than 45°)			
Thaw <input type="checkbox"/> not applicable (from freezing to 45°)		<ul style="list-style-type: none"> • Durable, corrosion-resistant, and non-absorbent 	<ul style="list-style-type: none"> • Clean and sanitize food-contact surfaces before using and after potential contamination AND every 4 hours
Cut/Wash Assemble <input type="checkbox"/> not applicable		<ul style="list-style-type: none"> • Smooth, easily cleanable surface 	
Cook / Reheat <input type="checkbox"/> not applicable <ul style="list-style-type: none"> • poultry – 165°/15 sec • burger – 155°/15 sec • whole package of hotdogs/chili/cheese – 135° • previously opened package of hotdogs/chili/cheese – 165°/15 sec • microwave – 165°/2 minutes 		<ul style="list-style-type: none"> • Cast iron only used as cooking surface • No sponges • Limitations on wooden food-contact surfaces • Free of breaks, open seams, cracks, chips, inclusions, pits, and similar imperfections • Free of sharp internal angles, corners, and crevices 	<ul style="list-style-type: none"> • 3 basins of sufficient size to submerge, wash, rinse, and sanitize utensils shall be provided • The temperature of the wash solution must be at least 110°F at all times of use unless the cleaning agent manufacturer’s label states otherwise
Hot Hold <input type="checkbox"/> not applicable (at least 135°)		<ul style="list-style-type: none"> • Microwave cooking has additional requirements 	
Multi-Use <u>Eating / Drinking</u> Utensil Washing & Air Dry <input type="checkbox"/> not applicable		<ul style="list-style-type: none"> • Hot oil filtering equipment has special requirements 	<ul style="list-style-type: none"> • At least one drainboard, table, or counter space is needed for air-drying
Multi-Use Utensil Washing & Air Drying <input type="checkbox"/> not applicable		<ul style="list-style-type: none"> • Ventilation hood systems must be readily cleanable, designed to drain without contaminating other items, and properly maintained 	<ul style="list-style-type: none"> • If the TFE is providing multi-use eating and drinking utensils, a three-compartment sink with drainboards of sufficient size is required
Handwashing Facilities		<ul style="list-style-type: none"> • Food thermometers must be accurate to $\pm 1^\circ$ if it measures in Celsius or Celsius and Fahrenheit; or $\pm 2^\circ$ if it just measures Fahrenheit 	
Other (describe process) <input type="checkbox"/> not applicable		<ul style="list-style-type: none"> • Dispensing equipment for liquid food or ice has special requirements 	

**** Return this with your application ****

**ATTACHMENT 4: Temporary Food Establishment
Off-Site Food Preparation Chart**

Complete this attachment if any food preparation (thawing, seasoning, marinating, etc.) will be done off-site prior to the event.

Facility Information – Check if Requesting TFE Commissary Permit

Where will the food preparation be done?

- Completely on-site during the event Off-site prior to or during the event

If food is being prepared off-site, it must be done in a permitted food-service facility or a permitted temporary food establishment commissary:

- Name of establishment where food will be prepared: _____
- Contact name: _____ Phone: _____
- Address of establishment where food will be prepared: _____

- County and State where facility permitted: _____
- Permit ID Number: _____

Food Preparation Information

In the following space list all food items which will be prepared off-site, how foods will be prepared, where foods will be stored and how foods will be transported to the event.

*** * Return this with your application * ***

ATTACHMENT 5: Temporary Food Establishment Employee Health (NC Food Code 2-201)

In order to reduce the risk of foodborne disease transmission,

You must interview all employees and volunteers about illnesses and exposures to illnesses they've had in the past. If they have had or been exposed to the illnesses listed in questions 2, 3, and 4, you must consult NC Food Code 2-201 to determine if the employee or volunteer has to be excluded from work or restricted in their duties, and when and/or under what conditions they can return to work. You must also require your employee or volunteer to tell you if they are experiencing any of the symptoms in question 1, or been diagnosed or exposed to the illnesses listed in questions 2 or 4. If you notice the symptoms, or they report it to you, then you must consult NC Food Code 2-201 to determine if the employee or volunteer has to be excluded from work or restricted in their duties, and when and/or under what conditions they can return to work.

Name of Employee / Volunteer Worker	Interviewed about Past Illness / Exposures	date	Understands Reporting Illness / Exposures	date
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

1. Does employee have any of the following symptoms?
 - a. Vomiting
 - b. Diarrhea
 - c. A lesion containing pus on the hands, wrists, exposed portions of the arms, or other portions of the body
 - d. Jaundice
 - e. Sore throat with fever
2. Does the employee have one of the following diagnosed illnesses?
 - a. Norovirus
 - b. Hepatitis A virus
 - c. *Enterohemorrhagicor Shiga Toxin-producing Escherichia Coli*
 - d. *Shigella* spp.
 - e. *Salmonella* Typhi
3. Has the employee been diagnosed within the past three months with *Salmonella* Typhi?
4. Has the employee been exposed to food, a person or a location associated with the following diseases?
 - a. Norovirus within the past 48 hours of the last exposure
 - b. Hepatitis A virus within the past 30 days of the last exposure
 - c. *Shigella* spp. within the past 14 days of the last exposure
 - d. *Enterohemorrhagicor Shiga Toxin-producing Escherichia Coli* within the past 3 days of the last exposure
5. The employee shall report to the person in charge if he/she develops the symptoms, becomes diagnosed, or becomes exposed as listed in 1-4.
6. The person in charge will notify the Craven County Health Department when a food employee is jaundiced or diagnosed with one of the above diseases listed in 2.
7. The person in charge shall exclude, restrict, and reinstate persons who exhibits or reports a symptom, or reports a diagnosed illness, or has a history of exposure (as listed above) in accordance with NC Food Code 2-201.
8. In addition, employees or volunteers with persistent sneezing, coughing, or a runny nose that causes discharges from the eyes, nose, or mouth may not work with exposed food, clean equipment, utensils, and linens or unwrapped single-service or single-use articles.

* * Complete and Make Available to Health Inspector On-site * *

ATTACHMENT 6: Temporary Food Establishment Evaluation Checklist

Name of Booth: _____

Date: _____

<p>No permit will be issued until information on Attachment 5 – Employee Health is provided</p>	<p>Arranged TFE to restrict public access to all areas except for dining areas</p>
<p>Overhead protection provided for food, utensils, and equipment. Only bulk foods like roasts, shoulders, and briskets may be cooked on a grill outside of the tent. Single portion (hot dogs etc.) must also be under the cover. Grill lids must be attached.</p>	<p>Lighting provided for nighttime events. Light bulbs shielded, coated, or otherwise shatter-resistant in areas where there is exposed food, clean equipment, utensils, and unwrapped single-service / single-use articles. Infrared / heat lamps must have a shield surrounding and extending beyond the bulb.</p>
<p>Ground cover – if you are not setting up on asphalt, concrete, grass or other surfaces that control dust or mud, you must have indoor/outdoor carpeting, matting, tarps, or similar nonabsorbent material</p>	<p>Handwashing facilities provided and equipped with soap, wastewater receptacle and paper towels. Water container must be at least a 2-gallon container with unassisted free flowing faucet. Warm water required.</p>
<p>Toxic materials are labeled, used and stored to prevent contamination.</p>	<p>Wastewater collection system. May consist of containers and hoses that are labeled and not used for any other purpose.</p>
<p>Restroom facilities are provided for employees, kept clean and in good repair</p>	<p>Connected to necessary utilities at all times food is prepared, served, or stored</p>
<p>Fans, screens, and/or walls are provided to keep dust, insects, rodents, animals, and other sources of potential food contamination out of the TFE. Food stored about the ground or floor.</p>	<p>3 basins of sufficient size to submerge, wash, rinse, and sanitize utensils. Detergent, sanitizer, sanitizer test strips, air-drying rack or tabletop provided. 3-comp sink provided when using multi-use eating and drinking utensils.</p>
<p>Running potable (drinking-water quality) water under pressure provided. Containers and hoses must be drained, washed, rinsed, sanitized and labeled. Warm water required. Must be from approved source.</p>	<p>Except for open receptacles used during operation, garbage stored in water-tight container(s) with tight-fitting lid or other approved method. Removed as needed to prevent vermin breeding and harborage</p>
<p>Employees have hair restraints and clean outer clothing</p>	<p>Food preparation sink provided when washing produce</p>
<p>Raw meat, poultry, and fish purchased in ready-to-cook form and portions – (cutting and skewering must be pre-approved by the health department)</p>	<p>Food thermometer: (must be accurate to $\pm 1^{\circ}$ if it measures in Celsius or Celsius and Fahrenheit; or $\pm 2^{\circ}$ if it just measures Fahrenheit)</p>
<p>Food shields or other effective barriers provided to protect food and food contact surfaces from contamination by customers / public</p>	<p>Salads containing ingredients that are cooked and cooled are purchased from an approved, commercial source (not prepared at TFE or commissary).</p>

*** * Keep this checklist at your temporary food establishment * ***

All items on this checklist are required to receive a permit from the local health department to prepare and sell food at this event. Please contact the Craven County Health Department, Division of Environmental Health, Food and Lodging Section if you have any questions (252) 636-4936.