



LINCOLN COUNTY ENVIRONMENTAL HEALTH

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Lincolnton, NC 28092
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TEMPORARY FOOD ESTABLISHMENT APPLICATION

Temporary Food Establishment and Temporary Food Establishment Commissary applications must be submitted no later than **15 calendar days prior to commencing operation**. Late submittals cannot be accepted.

Name of Food Establishment: _____

Owner/Contact: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

Email: _____

Name of Event Organizer: _____

Mailing Address of Event Organizer: _____

City: _____ State: _____ Zip code: _____

Phone Number of Event Organizer: _____

Email of Event Organizer: _____

Event Name: _____

Event Location: _____

Event Dates of Operation: _____

Event *Hours of Operation: _____

*Lighting is required in Temporary Food Establishments during nighttime events

A food booth may be exempt from the requirements if the following exceptions apply:

Establishments that are incorporated as nonprofit corporations in accordance with Chapter 55A of the General Statutes **or** that are exempt from federal income tax under the Internal Revenue Code, as defined in G.S. 105-228.90 **or** that are political committees as defined in G.S. 163-278.6(14) **and** that prepare or serve food or drink for pay no more frequently than once a month for a period not to exceed two consecutive days.

If you are representing a church or other nonprofit organization list your affiliation and tax exempt ID number: _____

APPLICATION FEE AND SUBMISSION DEADLINE:

- Application fee: **\$75.00** per Food Establishment. Must be paid at the time of application.
- Temporary Food Establishment and Temporary Food Establishment Commissary applications must be submitted no later than **15 calendar days prior to commencing operation**. Late submittals cannot be accepted.
- Applications for substitute vendors may be submitted no fewer than 3 business days prior to the event.
- A Temporary Food Establishment Commissary may commence operation not more than 7 days prior to the event and operate for the length of the event up to a time period not to exceed 21 consecutive days.
- Food sources must comply with NC Food Code 3-201. Foods prepared before the event in another location are **PROHIBITED** unless documentation is presented verifying compliance with the NC Food Code and the Rules Governing The Food Protection and Sanitation of Food Establishments 15A NCAC 18A .2600.
- Where food sources cannot be verified, you will be required to dispose of the food. Maintain purchase receipts and invoices.
- The Rules Governing the Food Protection and Sanitation of Food Establishments and the Food Code can be found at <http://ehs.ncpublichealth.com/rules.htm>
- Arrive early to set up your food booth for inspection so that you are completely set up by the appointed inspection time. Late arrivals will not be allowed to operate.
- **NO REFUNDS**. Refunds will not be given to vendors who miss the appointed inspection time for any reason.

UTILITIES, SERVICES & BOOTH SET UP:

1. Do you have an approved Employee Health Policy as required by the NC Food Code 2-201?
 Yes No
 - The Permit Holder shall require food employees and conditional employees to report to the person in charge information about their health and activities as they relate to diseases that are transmissible through food.
 - Food vendors must maintain a list of names, addresses and phone numbers of all workers working in the food booth. The list must be kept for 30 days and will be used in the case of a foodborne outbreak.
2. Please check or describe how your foodservice operation will be physically contained:
(check all that apply)
 - Enclosed trailer
 - Under a tent, shelter, canopy with proper physical barriers (fly fans, screens, etc.)
 - Permanent structure
 - Other, describe _____
3. Water Supply: How will potable water be supplied to your booth?
 - Public water supply by Organizer (food grade water hose required)
 - Onsite well (requires sampling)
 - Other, explain: _____

7. Describe **handling procedures** for each of the foods listed on the proposed menu:

Example:

Food Product: **Chicken wings**
Describe how product will be handled: **purchased frozen, stored frozen on ice, removed from package, placed into fryer, cooked to 165°F or above and served directly to customer**

Food Product: _____
Describe how product will be handled: _____

Food Product: _____
Describe how product will be handled: _____

Food Product: _____
Describe how product will be handled: _____

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Describe how product will be handled: _____

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Describe how product will be handled: _____

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Describe how product will be handled: _____

Food Product: _____
Describe how product will be handled: _____

8. If listed above, will produce require washing before preparation? No *Yes

*If yes, a separate food preparation sink must be provided. The food prep sink must meet Chapters 4.1-4.2 of the NC Food Code Manual.

9. List all Hot Holding and Cooking Equipment:

<i>Ex: Warming cabinet</i>
<i>Ex: Hot water Steam Table</i>
<i>Ex: Heat Lamps</i>

10. List all Cold Holding Equipment:

<i>Ex: Igloo cooler with drainage port</i>
<i>Ex: Mechanical refrigerator</i>
<i>Ex: Mechanical chest freezer</i>

UTENSIL WASHING AND SANITIZING

11. How will food service utensils (such as pans, spatulas, scoops, ladles and knives) be washed, rinsed and sanitized?

___ 3-compartment sink of sufficient size to submerge, wash, rinse and sanitize utensils

___ 3 basins of sufficient size to submerge, wash, rinse and sanitize utensils

___ Combination of sink compartments and basins. Describe below:

___ Other. Describe: _____

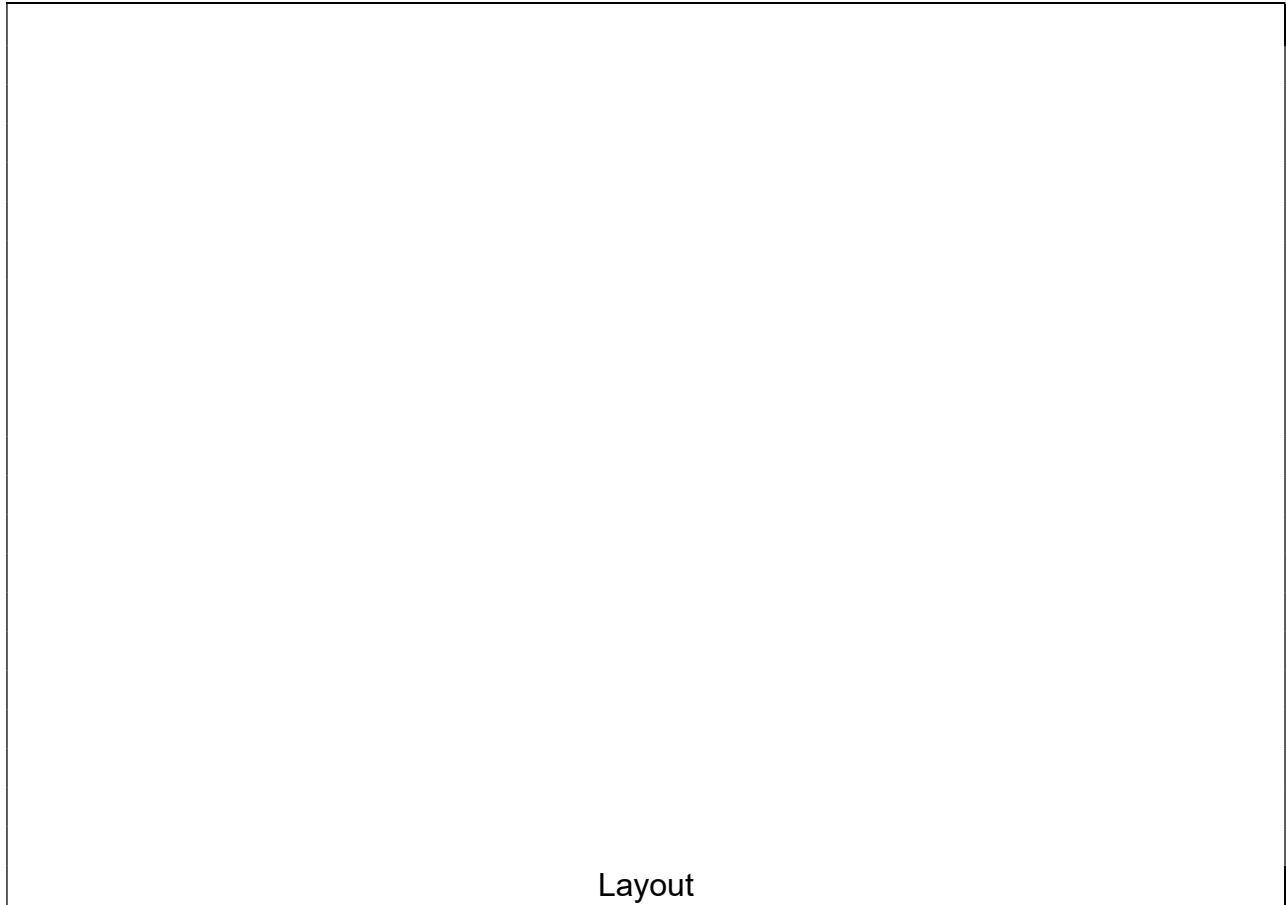
12. Verify that only single-use, disposable utensils will be used by customers:

- Single-use only (disposable) Multi-use utensils will be used
(Discussion and pre-approval required)

13. Test strips must provided for testing sanitizer strength.

14. A stem thermometer must be provided for measuring and monitoring food temperatures. (digital thin tip thermometer is recommended)

Sketch the layout of your foodservice booth/trailer. Indicate the size of the space. Draw and label the location of all equipment. Include cooking, cold holding equipment, prep tables, hand washing station & ware washing station.



Layout

Print Name: _____

Signed: _____ Date: _____
(Owner)

- Sign form;
- Return to Lincoln County Environmental Health 115 W. Main St. Lincolnton, NC 28092 with;
- \$75 fee payment