



# Richmond County Temporary Food Establishment Vendor Application

**Date Submitted  
To Richmond  
County**

Contact Name

Best Contact  
Number

This application must be submitted to the Richmond County Environmental Health Section at least fifteen (15) calendar days prior to the event. A \$75.00 fee is required for each booth and must be paid with the submission of this application.

Event:

Event Location:	(Street)	(City)	(Zip)
Event Dates:	To:	Hours:	TO:
Event Coordinator:	(Name)		(Number)
Booth Name:		Owner/Operator/Corp Name:	
Owner/Operator Address:	(Street#)		
(City)	(State)	(Zip)	
Phone Number:	Email:		

Name/Location of event worked immediately prior to this event:

**Food booth must be completely set up prior to permitting and no food preparation is allowed in the booth until the permit is issued.**

Date to be permitted?	Time to be permitted?
Do you have an employee health policy <b>as required?</b>	Yes: <input type="checkbox"/> No: <input type="checkbox"/> (If no, print last page)

Indicate distance and time to travel with food.

Will any food be prepared that is a specialized process? This includes sushi, sprouting beans, curing.



Indicate how food temperatures will be maintained during transport to the event: (check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Cooler with ice    | <input type="checkbox"/> Insulated heat bags |
| <input type="checkbox"/> Refrigerated truck | <input type="checkbox"/> Other:              |
| <input type="checkbox"/> Cambro             |  |

Will ice be used? If so, check all that apply

Commercial bagged ice

From approved Food Establishment

Source of water:

Public water supplied by organizer (food grade hose needed)

Sealed bottled water

Water from permitted Food Establishment

Check the boxes that best describes the disposal methods for the following:

Wastewater:

Garbage:

Event providing grey water disposal bin

Event providing dumpsters/pick up

Event has onsite sewer available to use

Other:

Taking back to approved Food Establishment

How will grease be disposed?

Check the boxes that best describe equipment in your booth: \*utensil washing and hand wash set up is required\*

Cold holding:

Hot Holding:

Utensil Washing:

Handwashing Set Up:

Refrigerated truck

Steam table

Plumbed 3-compartment sink

Plumbed sink

Household refrigerator

Grill

Plumbed 3 utility sinks

Makeshift station with unassisted gravity flowing faucet

Commercial refrigerator

Electric hot box

3 basins

Other:

Household freezer

Chafing dish

Other:

Commercial freezer

Other:

Cooler with drainage port

Other:

Check the box that describes the food booth set up: \*\*10x10 tent set up is only allowed with a very limited menu

3 sided tent (\_\_\_) x (\_\_\_) with front sneeze guards and fans

Tent (\_\_\_) x (\_\_\_) fans, sneeze guards on front, sides, and back

Trailer/Self Contained Unit (\_\_\_) x (\_\_\_)

Building/Indoor Event

Lighting in food service/storage areas:

Shielded bulbs

Shatterproof bulbs

What type of ground cover will be used?

Paper  Mats  Tarp

Other:

Location of garbage cans?

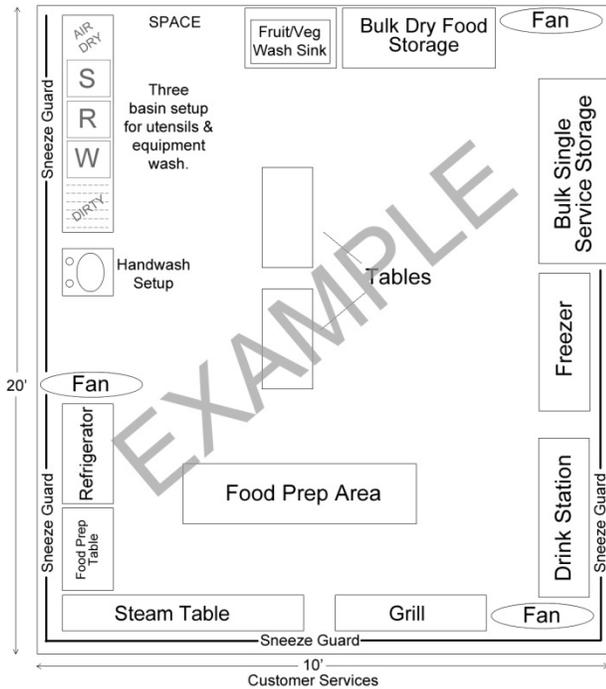
How will food be stored off the ground or floor?

Application(s) can be faxed to Richmond County Environmental Health Section at 910-997-8372 and payment can be called in at 910-997-8320 (leave message if voicemail). Application(s) and fee(s) can also be mailed or hand delivered to Richmond County Environmental Health, at 127 Caroline Street, Rockingham NC, 28379.

A copy of the North Carolina Rules Governing the Protection and Sanitation of Food Establishments 15A NCAC 18A .2600 and the North Carolina Food Code Manual can be obtained at:

<http://ehs.ncpublichealth.com/docs/rules/294306-26-2600.pdf>

Equipment Layout: Draw or attach a diagram showing the food booth set up. Drawing must show front service area, sneeze guards, handwashing station, utensil wash set up with air drying space, produce washing (if applicable), cooking equipment, refrigeration, hot/cold holding equipment, preparation areas, fan placement (if applicable), etc. Applications submitted without completed drawing will be **denied**.



**Statement: I hereby certify that the above information is complete and accurate. I fully understand that:**

- Any deviation from the above without prior written permission from Richmond County Environmental Health Section may nullify final approval and prevent issuance of a temporary food establishment permit.
- A pre-opening inspection (with electricity and equipment in place) of my temporary food establishment will be required before a permit will be issued.
- Food/drink that is **prepared before permitting** (without prior approval from Richmond County Environmental Health Section) may result in disposal or embargo of the food/drink.
- Failure to maintain approved temperatures for potentially hazardous foods may result in disposal or embargo of the food.
- Approval of this application does not indicate compliance with any other code, law or regulation that may be required. (ie: Fire Marshall, federal, state, and local authorities).
- Incomplete applications will be denied and returned.
- Both the TFE Application(s) and required fee(s) *must be received by* Richmond County Environmental Health Section *at least fifteen (15) calendar days prior to the event*, and the application shall be denied.

Owner/Manager/Designer \_\_\_\_\_ Date \_\_\_\_\_



# RICHMOND COUNTY ENVIRONMENTAL HEALTH SECTION

## CHECKLIST FOR TEMPORARY FOOD ESTABLISHMENT VENDORS

The following is a checklist to assist vendors in obtaining and maintaining a permit for a Temporary Food Establishment. All items are required to obtain a permit, however, additional requirements may be applicable. Both the TFE Application(s) and required fee(s) *must be received by* Richmond County Environmental Health Section *at least fifteen (15) calendar days prior to the event*, or the application shall be denied.

<p><b>Employee Requirements:</b></p> <ul style="list-style-type: none"> <li>No bare hand contact with ready to eat foods</li> <li>Employee health policy</li> <li>Hat, hair or other hair restraint</li> <li>No jewelry on arms and hands except plain ring</li> </ul>	<p><b>Utensil Washing:</b></p> <ul style="list-style-type: none"> <li>Plumbed 3 compartment sink, 3 utility sinks or 3 basins. Must be large enough to submerge the largest utensil</li> <li>Drain board or counter space for air drying</li> <li>Soapy water, rinse water and sanitizer</li> <li>Sanitizer test strips</li> </ul>
<p><b>Tent/Overhead protection:</b></p> <ul style="list-style-type: none"> <li>All items of food operation must be under tent or cover</li> <li>Smokers used to cook large whole cuts of meat are not required under cover – the lid to unit acts as cover</li> </ul>	<p><b>Handwash Station:</b></p> <ul style="list-style-type: none"> <li>At least a 2 gallon container under pressure</li> <li>Free-flowing faucet/stopcock/turn spout</li> <li>Soap and disposable towels</li> <li>Waste water catch bucket must be labeled</li> </ul>
<p><b>Food Protected and Secured:</b></p> <ul style="list-style-type: none"> <li>Food secured at all times to prevent tampering and contamination</li> <li>All food stored and transported in food grade containers</li> <li>No food exposed to customers (side guards or sneeze guards if needed)</li> <li>Approved self-service condiments</li> </ul>	<p><b>Food From Approved Source, Protected and Secured:</b></p> <ul style="list-style-type: none"> <li>Approved food sources with invoices</li> <li>Food stored off ground</li> <li>No food or drink preparation is allowed prior to issuance of TFE permit.</li> <li>All raw meat and poultry must be purchased ready to cook.</li> </ul>
<p><b>Water Supply:</b></p> <ul style="list-style-type: none"> <li>Approved water source</li> <li>Hoses must be for potable water and labeled with booth name. Backflow preventer required if directly connected to water supply</li> <li>Must have means to heat water for utensil and hand washing</li> </ul>	<p><b>Fresh Fruit/Vegetable:</b></p> <ul style="list-style-type: none"> <li>Produce must come in prewashed or a separate produce sink is required</li> <li>Produce sink is for produce washing only</li> </ul>
<p><b>Waste Water Disposal:</b></p> <ul style="list-style-type: none"> <li>Disposal in an approved sewage system</li> <li>Lines, buckets and tanks must be labeled</li> </ul>	<p><b>Lighting:</b></p> <ul style="list-style-type: none"> <li>Heat lamps protected against breakage</li> <li>All lights shatterproof or shielded above food prep or storage</li> </ul>
<p><b>Food Temperatures:</b></p> <ul style="list-style-type: none"> <li>Provide calibrated metal stem thermometer (reads 0-220F)</li> <li>Consumer advisory required for foods cooked to order</li> <li>Cold holding at 41F and below</li> <li>Hold holding at 135F and above</li> </ul>	<p><b>Permitting Times:</b></p> <ul style="list-style-type: none"> <li>Vendor is expected to be ready at permitting time given</li> <li>Vendor has 30 minutes to be ready for re-inspection or permit will be denied</li> </ul>
<p><b>Insect and Dust Protection:</b></p> <ul style="list-style-type: none"> <li>3 sided tent or mesh sides</li> <li>Fly fans</li> <li>Ground cover in absence of asphalt, concrete, or grass</li> </ul>	

# Employee Health Policy Agreement

(Please print and keep onsite during event)

## **Reporting: Symptoms of Illness**

I agree to report to the manager when I have:

1. Diarrhea
2. Vomiting
3. Jaundice (yellowing of the skin and/or eyes)
4. Sore throat with fever
5. Infected cuts or wounds, or lesions containing pus on the hand, wrist, an exposed body part (such as boils and infected wounds, however small).

## **Reporting: Diagnosed Illnesses**

I agree to report to the manager when I have:

1. Norovirus
2. Salmonella Typhi (typhoid fever)
3. Shigella spp. infection
4. E. coli infection (Escherichia coli O157:H7 or other EHEC/STEC infection)
5. Hepatitis A

*Note: The manager must report to the Health Department when an employee has one of these illnesses.*

## **Reporting: Exposure of Illness**

I agree to report to the manager when I have been exposed to any of the illnesses listed above through:

1. An outbreak of Norovirus, typhoid fever, Shigella spp. infection, E. coli infection, or Hepatitis A.
2. A household member with Norovirus, typhoid fever, Shigella spp. infection, E. coli infection, or hepatitis A.
3. A household member attending or working in a setting with an outbreak of Norovirus, typhoid fever, Shigella spp. infection, E. coli infection, or Hepatitis A.

## **Exclusion and Restriction from Work**

If you have any of the symptoms or illnesses listed above, you may be excluded\* or restricted\*\* from work.

\*If you are excluded from work you are not allowed to come to work.

\*\*If you are restricted from work you are allowed to come to work, but your duties may be limited.

## **Returning to Work**

If you are excluded from work for having diarrhea and/or vomiting, you will not be able to return to work until more than 24 hours have passed since your last symptoms of diarrhea and/or vomiting.

If you are excluded from work for exhibiting symptoms of a sore throat with fever or for having jaundice (yellowing of the skin and/or eyes), Norovirus, Salmonella Typhii (typhoid fever), Shigella spp. infection, E. coli infection, and/or Hepatitis A, you will not be able to return to work until Health Department approval is granted.

## **Agreement**

I understand that I must:

1. Report when I have or have been exposed to any of the symptoms or illnesses listed above; and
2. Comply with work restrictions and/or exclusions that are given to me.

I understand that if I do not comply with this agreement, it may put my job at risk.