

Application for a Temporary Food Service Operation

☐ SINGLE EVENT

☐ MULTIPLE EVENT (3 or more times/year)

Submit completed application no later than two weeks (10 business days) prior to the event to

Essex Health Dept., 29 West Ave., Essex CT 06426 or email to lfasulo@essexct.gov.

Each food vendor shall submit a complete application and all processes shall comply with the **FDA FOOD CODE**.

Attach a copy of your most recent food service inspection report completed by your Local Health Dept. or Health District

Event Sponsor or Organizer's Name

Event Name

Event Sponsor or Organizer's Address

Event Date(s) AND Times of Operation

Event Sponsor or Organizer's Phone & Email Address

Event Location (Street Address)

Food Vendor/Business Trade Name

Name of Licensed Food Vendor

Name of Person(s) in Charge

Email & Phone

1. List all foods and beverages that will be served (include condiments).

2. List all food sources. All shellfish must have tags stored with the product and originate from sources listed on the Interstate Certified Shellfish Shippers List (ICSSL).

3. List all food types to be prepared on site. Food shall only be prepared at the Temporary Food Event or in a Licensed Food Service Establishment. Licensed Food Service Establishments must attach a copy of their most recent inspection report completed by their local Health Department with this application.

4. How will foods be delivered?

5. How will **cold** TCS food be kept cold (**41 °F or below**)? Examples: raw meat, shellfish, cheese, butter, sour cream, cooked vegetables, etc. **A thermometer (0-220°F) must be on site to measure food temperatures.**

6. How will **hot** TCS food be kept hot (**135 °F or higher**)? Examples: cooked, ready to eat meat, poultry, soups, cooked vegetables, etc. **A thermometer (0-220°F) must be on site to measure food temperatures.**

7. Provide type and location of hand washing and toilet facilities. Handwashing stations **MUST** be placed in Food Preparation, Food Dispensing, and Dishwashing areas, if applicable.
8. Who is in charge of clearing/cleaning any tables for eating?
9. What type of Sanitizer (Chlorine, Quaternary, Iodine) will be on site at the event? How will utensils, cutting boards, etc. be sanitized? **Sanitizer test strips must be on site to assess sanitizer concentration. TCS food contact surfaces must be sanitized once every 4 hours.**
10. You must provide an adequate number of covered garbage receptacles that are located and emptied in such a way as to minimize odors, flies, etc. Please describe the arrangements you have made for garbage.
11. Please sketch or attach a layout of the site showing the location of Hand Washing Facilities, Food Booths, Restrooms, Garbage, Cans, Alcohol Distribution Points, etc.

Per Essex Ordinance, vendors are NOT PERMITTED to park on town-owned roads and property without prior written approval (permit) from the Board of Selectmen. Additional Permits May be Required from:

- Essex Building Dept. for all electrical and plumbing connections.
- Essex Building Dept. and Essex Fire Marshall for all gas or grill-type cooking equipment.
- Essex Fire Marshall for all Events using Tents of any size.
- Board of Selectmen and Parks & Recreation. Dept. for all events taking place on town property.
- Resident Trooper Office for all Events involving a Temporary Liquor Permit

I, the undersigned, hereby apply for a license to operate a Temporary Food Service Operation in the Town of Essex. If granted, I agree to comply with all applicable State Laws and Local Regulations.

Print Vendor Name

Vendor Signature

Date

OFFICE USE ONLY - LOCAL HEALTH DEPARTMENT APPROVAL

Application Approved? YES_____ No_____

Approved by: _____

Date: _____