



## Application for Temporary Food Service License

Per the Connecticut Public Health Code and the Eastern Highlands Health District Sanitary Code, individuals and organizations serving food to the public on a temporary basis are operating a Temporary Food Establishment and must apply for a Temporary Food Service License for each event. The purpose of the temporary food service license and guidelines is to help you to minimize the risk of foodborne illness from the event. By following these guidelines, you can help ensure the safety of the foods served and, in turn, protect the health of your patrons.

### DIRECTIONS

- The operator or vendor of **each** Temporary Food Establishment/Food Booth must complete this application.
- Farmers' market food service vendors are regulated as Temporary Food Establishments
- This application must be completed and submitted to the Eastern Highlands Health District (EHHD) with the applicable fee at least 14 days before the event. There is no license fee for non-profit organizations. Please check our fee schedule for commercial vendor and farmers' market vendor fees.
- Using the **Sketch area**, each operator must provide a drawing of the proposed temporary food establishment set-up.
- The [Temporary Food Event \(TFE\) Guidelines](#) (available on line at [www.ehhd.org](http://www.ehhd.org) or at your local EHHD office) include instructions to help you complete this application and provide important information regarding the preparation and service of food at your event. Please review the [TFE Guidelines](#) material carefully and be sure that all food handlers for the event understand and follow the Guidelines. The Licensee (applicant) should be actively involved in the food service operation and is responsible for making sure that proper food handling and food protection procedures are followed.
- An inspection of the food operation may be conducted on or before the day of the event by EHHD. If the inspector is satisfied that the conditions of the license are met, the license will be issued and must be posted at the event.
- The health district may restrict or modify the menu, food preparation methods, cold- or hot-hold procedures, or delivery methods to minimize the risk of foodborne illness.
- **Please Note: Applications received less than 14 days before the event or submitted with incomplete information may not be approved for the event start date. Additionally, a late fee of \$20 will be assessed for applications received less than 14 days before the event.**

Date of Submission: \_\_\_\_\_ Event Name: \_\_\_\_\_

Organization Sponsoring the Event: \_\_\_\_\_

Date(s) and Time(s) of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Town(s): \_\_\_\_\_

Name of Temporary Food Establishment (Vendor Business Name): \_\_\_\_\_

Name of Applicant/ Licensee: \_\_\_\_\_ Non-profit Organization ? Y/N \_\_\_\_\_

Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

For faster response time, please provide - Fax #: \_\_\_\_\_ Email address: \_\_\_\_\_

Note: All four pages of this application, including the drawing of the proposed TFE set-up, must be completed for review and license approval. Refer to the TFE Guidelines for instructions on completing the information requested in the following questions.

EHHD APPLICATION FOR TEMPORARY FOOD SERVICE LICENSE (continued)

Please provide the following information:

1. List all foods and beverages that will be served, including condiments. Attach a separate sheet if needed. Please consider adding healthy foods and beverages to your event menu – see details on page 1 of the TFE Guidelines. (NOTE: Any changes to the menu must be submitted to and approved by EHHD at least 10 days prior to the event.)

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2. Identify the sources of all food and beverage items you will use for this event:

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3. Will any foods and beverages be prepared off-site for this event? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please list the foods that will be prepared or cooked off site and complete a Base of Operation Declaration Form (located in the [TFE Guidelines](#)) describing the food establishment or commercial kitchen where the food is being prepared. Submit the Base of Operation form with this application for review by EHHD.

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4. Describe methods to be used to maintain proper temperatures of food during transportation and on site storage and cooking:

In Transit: \_\_\_\_\_.

Kept Cold on site: \_\_\_\_\_.

Kept Hot on Site: \_\_\_\_\_.

Cooking on-site: \_\_\_\_\_.

5. Describe the hand-washing equipment or facilities to be used by your Temporary Food Event workers:

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6. Identify the source(s) of the potable water supply and ice for your temporary food event/food booth and describe how water will be stored and used at the temporary food event/food booth:

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Source of Ice: \_\_\_\_\_.

7. Describe the type and location of the toilet/restroom facilities available to the food service workers at the event:

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8. Describe where utensil washing will take place. If no on-site washing is planned, provide for storage of back-up utensils:

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9. Describe how and where wastewater from hand washing, food prep and dish washing will be collected, stored and disposed:

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10. Describe how and where trash will be stored on site and disposed:

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11. Draw a sketch in the area below.

This temporary food establishment will be set up (check one):

Indoors (inside an enclosed building.)

Outdoors (must be set up under cover of a tent, canopy or roof structure\*.)

Fully Contained in a Mobile Vending Unit

\* Notice – Please check with your local building official and fire marshal for the safe and proper use of these structures.

**In the space below, provide a drawing of the Temporary Food Establishment/Food Booth**

Show layout and identify all equipment including cooking and cold holding equipment, hand washing facilities, work tables, barriers, dishwashing facilities, food and single service storage, garbage containers, and customer service area.

The equipment and booth layout must be set up to protect all food and food contact surfaces from adverse weather and site conditions and to prevent contact or contamination by non-food workers and customers. See TFE Guidelines for more information and instructions on drawing the layout.

(don't forget to read and sign page 4 of this application)

AGREEMENT

Approval of these plans and specifications by the Eastern Highlands Health District does not indicate compliance with any other code, law or regulation that may be required (i.e., federal, state or local).

This license is issued based on compliance with the Connecticut Public Health Code section 19-13-B42, and the Eastern Highlands Health District Sanitary Code. A site inspection may be conducted by health district staff to determine compliance. The licensee agrees to make any corrections deemed necessary by the health district for compliance with the above referenced codes.

The undersigned also agrees to the following: Maintenance of safe food temperatures, appropriate worker hygiene, and safe food handling practices will be followed to minimize the risk of foodborne illness.

Statement:

I have reviewed the attached material and understand that I am responsible for the safety of the food served at this event.

Food Vendor Applicant/Licensee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR EHHD USE	
Temporary Food Service Event (Non Farmers' Market) :	
<input type="checkbox"/> Non-profit -Fee waived <input type="checkbox"/> 1-14 days-\$65 <input type="checkbox"/> Samples Only -\$30 <input type="checkbox"/> Late fee- \$20* pending policy written by DOH	
Fee Amount: \$ _____	Date Received: _____ Check # _____ Receipt # _____
Approved by: _____ Date: _____	
Conditions/Comments: _____	
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Please note that health district approval of your Temporary Food Event License may not be the only approval required for your event/activity. <b>Please check with your local building official, fire marshal and zoning official for other permit or approval requirements.</b>
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Call your town's Sanitarian in the satellite office or the Eastern Highland Health District main office if you have any questions or concerns.

Main office-Mansfield: (860)429-3325  
 Andover office: (860)742-4037  
 Ashford office: (860)429-3325  
 Bolton office: (860)649-8066 ext 6108  
 Chaplin office: (860)429-3325

Columbia office: (860)429-3325  
 Coventry office: (860)742-4064  
 Scotland office: (860)429-3325  
 Tolland office: (860)871-3601  
 Willington office: (860)871-3608