

ATTACH ADDITIONAL SHEETS IF NECESSARY.

FOOD INFORMATION: A complete listing of ALL food/beverage products served, sold, sampled, or given away from your facility must be detailed below.

Business Name: _____ Temporary Event Name: _____

Menu Item(s): Include all food, beverages, condiments and all extra ingredients served with each item.	* (1) Prepared / stored in advance	Prepared ONLY at event	Bought at store / restaurant	At event, item will be served:					* (3) Serve samples	Preparation Methods AT the Event:					List food equipment to be used at the event (e.g., cold-holding and hot-holding devices, rapid reheating methods, cooking equipment, sneeze guard protection) AND any additional preparation methods. - If any potentially hazardous foods will be held at room temperature, you must submit a Time as a Public Health Control (TPHC) plan for approval.
				* (2) Pre-packaged	Hot	Cold	Room Temperature	Cook to Order		Thaw	Cut / assemble / portion	Cook / bake / grill	BBQ / Deep fry	Reheat	
<i>Example: Tamales</i>	X				X									X	<i>Pot to reheat and hot hold</i>
<i>Example: Potato salad</i>			X			X									<i>Food storage containers; on ice</i>

* (1) **ADVANCE PREPARATION / STORAGE activities at approved kitchen** No advance preparation Food storage only
 * No home food storage or preparation unless prepared by a Cottage Food Operation under registration or permit (attach copy of registration or permit)

If you do not have a permitted food facility, you must obtain permission to use a kitchen or commissary facility which has been approved in advance by the local dept. of environmental health or obtain prepared foods from an approved source. Standard Operating Procedures (SOPs) or pre-event inspections may be required. Have copies of food invoices/receipts at your booth, available for review upon request, as any unapproved foods found will be removed from public distribution.

Commercial Kitchen or Commissary Name	The applicant submitting this application has permission to use this facility for the specified date(s) and time(s). If this permission is rescinded, I will immediately notify County of Santa Clara Dept. of Environmental Health (408-918-3400).		
Address and City			
Phone #	Date(s)/Time(s) of Pre-Event use	Print name of Permit Holder or Authorized Kitchen Representative	
<input type="checkbox"/> Valid Env. Health Permit in Santa Clara County (SCC). Enter Facility #: FA <input type="checkbox"/> Facility is permitted outside SCC (ATTACH A COPY OF VALID HEALTH PERMIT).		Signature	Date

(a) Describe food items and how they will be prepared.

(b) Describe cooling procedure for potentially hazardous foods (PHF). (Include how temperatures will be monitored and verified.) No PHFs

* (2) If you or a co-packer pre-package food or beverages, a Processed Food Registration (PFR) is required. For more info: www.cdph.ca.gov

(a) Will you PRE-PACKAGE food/beverages before the event? No Yes - submit copy of your valid PFR.

(b) Do you use a CO-PACKER? No Yes - submit copy of your co-packer's valid PFR.
 If you receive food a day or more before the event, complete the "Advance Preparation/Storage activities at approved kitchen" section above.

* (3) **SAMPLING Procedures:** Samples prepared in advance? Yes No Samples pre-portioned and pre-packaged in advance? Yes No

Include how and where samples will be prepared and how they will be served.