TEMPORARY FOOD SERVICE APPLICATION INFORMATION

This application and all applicable information for each food service vendor must be submitted no later than two weeks (10 business days) prior to the event.

The Ridgefield Health Department wants public events sponsored by all organizations to be successful and safe. To that end, event organizers who are including food service as part of their event are required to register the event with the Ridgefield Health Department.

A “Temporary Food Service Event” is defined as a food service establishment that operates at a fixed location for a temporary period of time, including one-day events and not to exceed 14 consecutive days. Temporary Food Service includes, but is not limited to, the following: fairs, carnivals, public exhibitions, festivals, religious institution events and school functions. Each operation (booth) servicing food at a temporary event must obtain a Temporary Food Service License from the Ridgefield Health Department (non-potentially hazardous foods sold during non-profit fundraising drives and church bake sales are exempt from these requirements).

It is incumbent on each sponsoring organization to ensure that those involved in food service have adequate knowledge and take appropriate precautions to ensure that the consuming public is safe from foodborne illness.

There is a $50 application fee due at the time your application is submitted (non-profit organizations are exempt from the fee). The Health Department is confident that if volunteers adhere to the proper procedures, your event will meet the requirements of the Connecticut Public Health code. The order of events in obtaining a Temporary Food License is as follows:

1. Create your online application and upload documents (This application, QFO and menu). The $50 application fee can be paid via credit card/paypal online, or by check (payable to “Town of Ridgefield”) or cash at the Annex. Hours are 8am-4pm, Monday thru Friday.

2. After reviewing your application, we may contact you. Depending on the nature of your event, we may want to discuss details with you or provide you with further information.

3. We may inspect the food service operation at your event to ensure that food safety procedures are being followed.

4. After the event, be sure to keep the completed Log Book record for 90 days. This requirement is important because in the rare event of illness as a suspected result of food served at your event, we will need to conduct a “Food Service Outbreak Investigation.” The Log Book record will allow us to determine if workers may have been exposed to some foodborne disease. As a practical matter most groups save their information from year to year which they use as a guide for the following year.

The Ridgefield Health Department will be happy to consult with you to help ensure the safety and success of your event.

66 Prospect Street, Ridgefield, Connecticut 06877 (203) 431-2745
TEMPORARY FOOD SERVICE APPLICATION

Name of Event: _____________________________________________________

Event Address: _____________________________________________________

Date(s) of Event: ____________________________________________________
(Start & End Dates)

Vendor Participating: _________________________________________________

Vendor Address: _____________________________________________________

Person(s) in Charge

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS</th>
<th>PHONE #</th>
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Food Service Menu (or attach literature): _____________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

A. Temperature Control of Food

How will hot foods be kept hot (140°)? _________________________________________

_____________________________________________________________________________________

How will cold foods be kept cold (45° or below)? ________________________________

_____________________________________________________________________________________

How will frozen foods be thawed? _________________________________________________

_____________________________________________________________________________________

www.ridgefieldct.org
Will each food station have a probe thermometer? _____ Yes _____ No

How will thermometers be sanitized? ________________________________

B. **Personal Hygiene**

Describe hand wash facilities. ________________________________

Describe bathroom facilities. ________________________________

Describe source of potable water. ________________________________

Describe how potable water will be stored (if applicable). ________________________________

C. **Food Handling**

Describe utensils to be used. ________________________________

Will disposable gloves or deli papers be used? Gloves_____ Deli Papers _____

D. **Log Book Record** (Names(addresses, phone numbers of food handlers)

Who will be in charge of log book? ________________________________

Where will log book be stored? ________________________________

E. **Cleaning/Sanitizing/Dishwashing** (This is for utensils only. Food must be served on disposables.)

Describe utensil washing facilities and procedures. ________________________________

Indicate what will be used as sanitizing agent. ________________________________

How will clean utensils be stored? ________________________________
F. **Food Source**

Indicate where each food item on menu will be purchased. ____________________
___________________________________________________________________
___________________________________________________________________
____________________
_______________________________________________
___________________________________________________________________
___________________________________________________________________

Describe what will be done with leftovers. _________________________________
___________________________________________________________________
___________________________________________________________________

G. **Food Booth** (If Applicable)

Describe booth – Indicate how food will be protected from insects, dust, rain, etc.
___________________________________________________________________
___________________________________________________________________

Will sneeze guard be used? Describe ____________________________________
___________________________________________________________________

Where will food containers be positioned in booth? __________________________
___________________________________________________________________

Where will single service items be stored in booth? _________________________
_______________________________________________________________

H. **Toxic Items**

How will cleaning and sanitizing supplies be stored? _______________________
___________________________________________________________________

I. **Transportation of Food to Event**

Describe how and when ________________________________________________
J. **Toilet Facilities**
   Indicate where located and quantity of facilities. ________________________________
   __________________________________________________________________________

K. **Sewage Disposal**
   Describe how wastewater will be disposed. ________________________________
   __________________________________________________________________________

L. **Garbage Disposal**
   Describe garbage facilities for each food booth. ________________________________
   __________________________________________________________________________
   Describe where garbage will be disposed at end of event. ______________________
   __________________________________________________________________________
   Where will grease be disposed? ________________________________
   __________________________________________________________________________

_________________________________________________  ____________________________
Signature                                              Date

_________________________________________________
Contact Phone Number (cell/home)  Email Address