NEVADA COUNTY CALIFORNIA | Community Development Agency

Environmental Health Department

950 Maidu Avenue, Suite 170
PO BOX 599002
Nevada City, CA 95959-7902

PH: (530) 265-1222 ext. 3
FAX: (530) 265-9854

www.nevadacountyca.gov

Application for Temporary Food Facility (TFF) Vendor Permit

Application Submittal and Payment Instructions

- Applications must be received **at least two weeks** prior to the planned event. **Applications received less than two weeks before the event will be charged a 25% late fee. Applications submitted less than two days before the event will not be accepted.**
- This permit application is valid for one TFF vendor booth. A separate application and fee are required for each additional booth.
- Permits are valid from January 1st - December 31st , regardless of the date of issuance.
- Submit completed application and agreement to pay form and email to env.health@nevadacountyca.gov. Once the application is processed, you will receive an email with an invoice and online payment instructions. Applications may also be submitted over the counter at the Environmental Health office.

Applicant Information

Applicant Name:					
Name of Concession/Booth:					
Applicant Address:		City:		State:	Zip:
Phone:		Email:			

Type of Temporary Food Facility Permit - *Select one*

☐ High Risk Foods - $238.20	☐ Low Risk Foods - No Fee	☐ Veteran (High or Low Risk) - No fee
Potentially hazardous foods (ie. food that requires refrigeration or proper hot holding to keep safe)	Non-potentially hazardous foods (ie. foods that do not require refrigeration or hot holding to keep safe)	Submit Veteran Exemption Form, Copy of DD214 and Drivers license

*****If unsure if your operation is High Risk or Low Risk, please email env.health@nevadacountyca.gov for assistance.*

A. VENDOR RESPONSIBILITIES AND CERTIFICATION

I certify that I am familiar with the requirements to operate a Temporary Food Facility (TFF) as a vendor (CAL CODE section 113947.1c) and agree to operate in a manner consistent with those requirements. I also understand that, depending on risk assessment and staff assignments, an initial phone interview and event inspections may be conducted by this office.

I agree to post my TFF vendor permit in a location visible to the public while operating.
I agree to obtain approval from Environmental Health for any menu or set-up changes prior to the event.
I agree to renew my TFF vendor permit should it expire before continuing to participate in any community events.

Applicant Signature: _____ Date: _____

OFFICE USE ONLY

☐ Approved ☐ Denied, *Reason*: _____ *FA* _____

By: _____, REHS Date: _____ *PR* _____

B. FOOD/BEVERAGES TO BE SOLD OR SERVED AT THE EVENT

List all foods and/or beverages to be offered **(Or attach menu).** Note: Off-Site Prep means preparation, usually ahead of time, at a location other than within your temporary food facility booth, such as a permanent food facility or commissary.

Food or Beverage Item*	Off-Site Prep**	How Served	Made to order	Describe Preparation Method (eg. mixing, BBQ, fry, grill
	☐ Yes ☐ No	☐ Hot ☐ Cold	☐ Yes ☐ No	
	☐ Yes ☐ No	☐ Hot ☐ Cold	☐ Yes ☐ No	
	☐ Yes ☐ No	☐ Hot ☐ Cold	☐ Yes ☐ No	
	☐ Yes ☐ No	☐ Hot ☐ Cold	☐ Yes ☐ No	
	☐ Yes ☐ No	☐ Hot ☐ Cold	☐ Yes ☐ No	
	☐ Yes ☐ No	☐ Hot ☐ Cold	☐ Yes ☐ No	

ATTENTION - Food storage and preparation is NOT ALLOWED to be done in a home kitchen. Unless using an approved commissary, all food must be purchased the day of the event. Receipts showing proof of purchase must be provided to the inspector at the event.

For Off-Site Prep, **submit a signed Commissary Usage Agreement form with your application. For prepackaged items, such as olive oil, jam, fish, beef jerky, salsa, hot sauce, etc., provide a copy of your Processed Food Registration (PFR), Cannery License, or Co-Packer agreement.

C. HOT/COLD HOLDING EQUIPMENT

Identify methods for maintaining food hot (>135*F) or cold (<41*F)

Cold Holding Equipment (Check all that apply): ☐ Ice Chest ☐ Mechanical Refrigerator ☐ N/A ☐ Other: _____

At the end of each day, discard all potentially hazardous foods not held under mechanical refrigeration at or below 41°F.

Hot Holding Equipment (Check all that apply): ☐ Hot Holding Cabinet (Cambro) ☐ Steam Table ☐ Soup Warmer/Crock Pot ☐ Chafing Dishes ☐ Hot Dog Steamer/Roller ☐ Electric Rice Cooker/Warmer ☐ N/A ☐ Other: _____

At the end of each day, discard all hot held potentially hazardous foods. COOLING FOR NEXT DAY SERVICE IS NOT PERMITTED.

How will food storage temperatures be monitored at the event? ☐ Probe thermometer ☐ Ambient thermometer ☐ N/A

D. SAMPLING

Samples displayed for customer self-serve shall be individually portioned in lidded containers or dispensed by an employee to a customer using single service wrappers or utensils. Self-service communal bowls are not approved.

Type of sampling: ☐ Prepackaged samples ☐ Dispensed samples ☐ N/A, no sampling

E. HAND WASHING FACILITIES

For temporary food facilities with open food/beverage or sampling, a hand wash station is required **within the booth.**

Type of hand wash station:

☐ Water containers (5-gallon supply) with hands free spigot ☐ Plumbed sink ☐ N/A, prepackaged foods only and no sampling

Hand wash station shall provide for hands-free water flow, pump soap, single-use towels, and wastewater catch bucket.

F. SANITIZING SOLUTION

Provide information about sanitizers to be used for utensil washing and or to sanitize food contact surfaces.

Sanitizer: ☐ 100ppm Chlorine ☐ 200ppm Quaternary Ammonium ☐ N/A, prepackaged foods only

Ensure that appropriate test strips are available at booth and used to test solution.

G. WASTE DISPOSAL

All waste must be disposed of properly. Liquid waste shall NOT be dumped on the ground or into a stormdrain.

Liquid waste removal provided by:

☐ Booth operator ☐ Event organizer ☐ Sanitary sewer ☐ Waste removal company ☐ N/A, prepackaged foods only

Address where liquid waste will be disposed of (if applicable): _____

H. UTENSIL WASHING

A utensil washing station is required within the booth for cleaning/sanitizing food preparation and serving utensils such as knives, tongs, scoops, spatulas, etc.

Indicate your method of utensil washing:

☐ No utensil washing station (No food preparation or serving utensils will be used at event).

☐ No utensil washing station (Facility will operate for no more than 4 hours at a time with adequate supply of spare utensils).

☐ Three-step (wash/rinse/sanitize) utensil washing station using containers within booth. Containers must fit your largest utensil.

☐ Three-step (wash/rinse/sanitize) plumbed utensil washing sink with hot (120°F) and cold running water under pressure.

I. FOOD BOOTH CONSTRUCTION

Option 1: Booths with open food handling must be fully enclosed **on all 4 sides** (mesh screen, wood, or metal), have an approved floor (concrete, asphalt, tarp, or plywood), and overhead protection (pop-up tent). Fully enclosed booths may have two serving windows that are no larger than 18"x12" each, separated by at least 18 inches. Note: Mesh screening is a common wall material. Mesh screen service windows can be kept closed with Velcro or ties.

Option 2: Side walls are not required when all food is prepackaged or when the operation is limited to serving food from approved food compartments such as a lidded chafing dish, covered crock pot, or enclosed display case. In these instances, food is usually prepared ahead of time. **Overhead protection is still required**. Note: When in doubt, email env.health@nevadacountyca.gov to ask whether your specific operation requires full enclosure or just overhead protection.

Note: Approved flooring is not required for prepackaged foods only.

Select type: ☐ Outdoor Booth (Pop-up tent) or Indoor Booth ☐ Mobile Food Truck/Trailer ☐ Permanent structure at event

Floor Material: _____ Ceiling/Overhead Material: _____ 4-Sided Wall Material: _____

Method for closing service windows: ☐ Velcro/ties ☐ Glass/plexiglass ☐ N/A ☐ Other (specify): _____

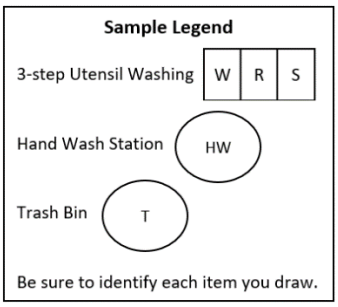
J. SKETCH OF BOOTH LAYOUT

A temporary food facility application must include a site plan of the booth to be constructed. Include location of equipment for cooking, hot/cold holding, hand washing, food/utensil storage, utensil washing, and trash.

Vendor Identification (must be clearly visible to customers at booth)

Concession/Booth Name (minimum 3-inch lettering): _____

City, State and Zip (minimum 1-inch lettering): _____



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COMMISSARY USAGE AGREEMENT

(Select one): ☐ Mobile Food Facility ☐ Caterer ☐ Temporary Food Facility ☐ Platform Kitchen Operation

Section 1 - To be completed by Applicant – Please print or type

Business Name: _____ Permit # _____
Owner/Operator Name: _____ Email: _____
Business Mailing Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Bus. Phone: _____

I, _____, hereby affirm the above information is current and accurate and I agree to utilize my commissary in accordance with California Retail Food Code requirements. If this commissary agreement is modified, expired or canceled by either myself or the commissary operator, I understand it is my responsibility to submit a new commissary agreement form to Environmental Health within **30 days** to maintain a valid health permit. I understand I must report to my commissary once per operating day and maintain a Usage Log on site at the commissary. Failure to comply with the above stated requirements may result in permit revocation.

Print Name & Title: _____ Signature: _____ Date: _____

Section 2 – To be completed by Commissary Owner/Operator- Please print or type

Commissary Name: _____ Permit #: _____
Owner/Operator Name: _____ Email: _____
Commissary Address: _____ City: _____ State: _____
Zip: _____ Bus. Phone: _____ Hours of Operation: _____

Is commissary located in Nevada County? ☐ Yes ☐ No If no, provide a copy of the current health permit from jurisdiction issuing the permit and a copy of the most recent inspection report.

I, commissary owner/operator, hereby declare the applicant stated above has permission to use my approved commissary, and will be provided following facilities and services (*check all that apply*):

- ☐ Space for sanitary food preparation/packaging
- ☐ Storage of food, utensils and supplies
- ☐ Hot/cold potable water for washing and sanitizing
- ☐ Potable water for filling mobile water tanks
- ☐ Liquid waste disposal
- ☐ Garbage disposal
- ☐ Grease waste bin
- ☐ Electrical outlets/ hook-ups
- ☐ Refrigerator/ freezer storage space
- ☐ Dry food storage
- ☐ Warewashing facilities/ 3-comp sink
- ☐ Restrooms and janitorial sink
- ☐ Handwashing facilities supplied with soap and paper towels in a dispenser
- ☐ Use of NSF approved equipment
- ☐ Other: _____

I, _____, hereby affirm the information I provided is current, accurate and to the best of my knowledge meets California Retail Food Code requirements. **I understand, if the food operator stated above, leaves my commissary, or if this contract is modified or expired, I am required to notify Environmental Health immediately. Email notification to: env.health@nevadacountyca.gov**

Print Name & Title: _____

Signature: _____ Date: _____

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AGREEMENT TO PAY

Nevada County Community Development Agency fees are based on Board of Supervisor approved fee schedules. Hourly fees and fees for services in excess of a minimum fee collected, including re-inspections, are billed to the applicant based on the Board approved fee schedule in effect at the time the work is performed by staff. This *Agreement To Pay* form must be signed and original signatures submitted to the NCCDA along with the completed permit forms and the initial payment of fees. Copies of current fee schedules are available from our Customer Service Staff or on the web at *http://www.mynevadacounty.com*

I/We understand that the NCCDA will bill as services are rendered, and I/We agree to pay such billing within thirty (30) days of the mailing of such billing for the project/permit. If payments on outstanding invoices are not made within thirty (30) days after the date of the invoice, County staff may cease work on the project until the required payment is made, subject to any other provisions of the law. All fees must be paid prior to the granting of any permits, approvals, or any land use entitlement for which services are required. The collection of fees, however, does not guarantee the granting of any permits, approvals, or land use entitlements for which I/We are applying.

Site Information:	**Invoices and/or notices to be mailed to:**
APN: _ _ _	Name:
Property Owner/Business Name (if applicable):	Address:
Address:	
	Telephone:
Email:	Email:

NCCDA Staff is authorized to consult with necessary governmental agencies and the following individuals concerning this project:

I certify under proof of perjury that I am the property owner or that I am authorized to enter into this fee agreement on his/her behalf. I have read the conditions concerning Nevada County Community Development Agency Fees and I understand that in the event that the billing party I have indicated does not pay required fees, I will be responsible for payment. I further agree to advise the department in

Printed Name

Dated:

CDL#

Signature

THIS SECTION FOR OFFICE USE ONLY

Service: Program: Job No:

Amount: $ Check #: Receipt #: Date of Receipt:

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