Virginia Beach Department of Public Health 4452 Corporation Lane, Virginia Beach, VA 23462 (757) 518-2646 | Fax: (757) 518-2642

Temporary Food Establishment Application

VIRGINIA DEPARTMENT OF HEALTH Protecting You and Your Environment		A COMPLETED APPLICATION AND ANY APPLICABLE APPLICATION FEE(S) MUST BE RECEIVED BY THE HEALTH DEPARTMENT AT LEAST <u>TEN (10) CALENDAR DAYS</u> PRIOR TO THE EVENT.			
\$40.00	Temporary Food Establishment Application Fee				
\$0.00	Temporary Food Establishment application fee for churches; fraternal, school and social organizations; and volunteer fire departments and resource squads that are exempt under §35.1-25 and §35.1-26 of the <i>Code of Virginia</i> .				
\$0.00	Applicant with documentation of paying a Temporary Food Establishment Fee in the current calendar year.				
\$0.00		al resident locality pa prary event per calendar year which is lo			

Event Information									
Event Name:									
Event Coordinator/Phone Number/Email Address:									
Event Location Address and Phone Number:									
Dates of Event: To Ra	nin Dates: To								
Vendor Information									
Vendor Business Name (include any trade. fictitious or "doin	ng business as" names):								
Name of Owner:									
Booth Name (if different from vendor name):									
Vendor Address:									
Vendor Phone Number/Email Address:									
Onsite Person Name and Contact Email and Cell Phone:									
Set-up Date and Time:									
Dates of Operation:									
For Office Use Only	Approved by:								
Signature:	Date:								

Food Preparation and Menu

Only the food items listed below will be approved to serve. Any changes must be approved by the local health department prior to the event. List all foods that will be served. Attach additional pages as needed.

Food Item	Purchased Raw or Cooked? On-site or Off-site prep?	Transported hot or cold? What type of equipment used to transport?	Type of cold holding equipment used at event? (41°F or below)	Cooking and/or reheating equipment used Final cook temp	holding ? equipment used	
Sausage	Raw, On-site	Cold/on ice	Ice Chest	Grill, 175°F	Steam Table	
For food items that will be prepared at a different location than the event location include the name and location of the permitted food establishment.						
Permitted Food Establishment Name:			Name of Owne	Name of Owner/Operator:		
Food Establishment's Physical Address:			Owner/Operato	Owner/Operator Phone Number:		
Signature of Permit Holder:			Permit Number	Permit Number: Date:		
				•	Duit.	

Temporary Food Establishment Construction						
Overhead	Canvas	Wood	Plastic	Other:		
Covering						
Floor:	Asphalt	Concrete	Wood	Other:		
Walls (if applicable):	Screens	Concrete	Wood	Other:		
Water Source			Wastewater Disposal (provided by):			
Permitted Waterworks/ Municipal Supply			Event Coordinator			
Private Well			☐ TFE Operator			
Food Grade Hose Provided: Yes No			Disposal Method:			
Utensils and Equi	-		Handwashing Facilities (provided by):			
Single-Serve eating and drinking utensils			Event Coordinator			
Multi use kitche			¥	TFE Operator		
Type of Utensil W			Type of Handwashing Facilities			
Three basin setup			and wastewater holding tanks)			
Shared three compartment sink(if pre-approved)			Plumbed with hot and cold water under pressure			
Three compartment sink within a food			Gravity-fed water with spigot/bucket			
establishment						
Utensil sanitizer to be used: Chlorine Quaternary Ammonia Other:			Hand soap, single-use towels, and trash receptacle shall be provided at all handwashing sinks.			
		·	1	5		
Food Storage or Display Equipment: Identify			Cooking Equipment: Identify all cooking			
0 1 1	all holding equipment (hot/cold) that will be			equipment that will be used:		
used:						
Toilot Facilities for	r Food Emplo	V005+	Flootricol Su	unn]v.		
Toilet Facilities for Food Employees:			Electrical Supply: Refrigeration or Freezer available			
TFE Operator			Lighting available			
Method (if not provided by the event):						
Food Transportation: Identify how food will			Refuse Removal (provided by):			
-	be transported to events:			Event Coordinator		
1			TFE Operator			
			-	Method (if not provided by the event):		
I understand that a temporary food establishment permit will not be issued until it is verified that the application and						

information contain herein meets the Board of Health Food Regulations (Food Regulations) under 12 VAC5-421 et seq., any other pertinent local laws or ordinances, and has been signed and approved by the local health department. I attest to the accuracy of the information provided and agree to comply with the Food Regulations as it pertains to the operation of a temporary food establishment. I agree to allow access to the establishment during hours of operation and other reasonable times.

Applicant

Name: ______Signature: _____

This form contains identifying information subject to disclosure per the Virginia Freedom of Information Act (Virginia Code § 2.2-3700 et seq.)

Please attach a photograph or drawing illustrating the placement of all equipment and accessories used in the operation.