

**Application for a License to Conduct a Temporary:** (check only one)  Food Service Operation  
 Retail Food Establishment

**Instructions:**

1. Complete the applicable section (make any corrections if necessary).
2. Sign and date the application
3. Make a check or money order payable to **Greene County Public Health**
4. Return check and signed application to: **Greene County Public Health, 360 Wilson Drive, Xenia, OH 45385**

Before the license application can be processed, the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in the license not being issued. This action is governed by Chapter 3717 of the Ohio Revised Code.

**Name of temporary food facility:** \_\_\_\_\_

**Location of event:** \_\_\_\_\_

**Address of event:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Start date:** \_\_\_/\_\_\_/\_\_\_ **End date:** \_\_\_/\_\_\_/\_\_\_ **Operation time(s):** \_\_\_\_\_

**Name of license holder:** \_\_\_\_\_ **Phone number:** \_\_\_\_\_

**Address of license holder:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**NOTE:** Applications for a temporary food license **MUST** be submitted a minimum of **5 business days** in advance of your event. Failure to do so prior to the event may result in denial of application for a food license. I, the undersigned, as duly authorized organization representative, understand we must comply with all Ohio Food Code regulations. Failure to maintain required food holding temperatures may result in the disposal of such foods. We acknowledge that we may not begin operations or sell any food prior to properly setting up all handwashing, dishwashing facilities, etc., and the location is set up as per the site drawing.

*I hereby certify that I am the license holder, or the authorized representative, of the temporary food service operation or temporary retail food establishment indicated above:*

\_\_\_\_\_  
Signature \_\_\_\_\_  
Date



**LICENSOR TO COMPLETE BELOW**

**Valid Date(s):** \_\_\_\_\_ **License Fee: \$75.00**

**Application approved for license as required by Chapter 3717 of the Ohio Revised Code.**

**By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Audit No.:** \_\_\_\_\_ **License No.:** \_\_\_\_\_



# TEMPORARY PLAN REVIEW APPLICATION

Date: \_\_\_\_\_

## EVENT INFORMATION

Indoor event       Outdoor event

Name of Operation: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Name of Event Coordinator (if applicable): \_\_\_\_\_

Coordinator phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address of Event: \_\_\_\_\_

Operation Hours: \_\_\_\_\_

List the time the operation will be set up and ready for inspection: \_\_\_\_\_

## APPLICANT INFORMATION

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## MENU


List of all foods that will be prepared and sold, including beverages: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OPERATOR / LICENSE HOLDER INFORMATION**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

 Email: \_\_\_\_\_

Email: \_\_\_\_\_

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

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

Where will you purchase the food and/or ingredients for the food items you will be selling at the event? List all vendors, suppliers, and/or licensed facilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the source of potable water used for the food event? \_\_\_\_\_  
\_\_\_\_\_

How will liquid waste be disposed? \_\_\_\_\_  
\_\_\_\_\_

How will solid waste be disposed? \_\_\_\_\_  
\_\_\_\_\_

Where will food be prepared? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How will food be cooked to proper temperature and maintained at 135°F or above? Grills, stoves, and microwaves are acceptable for heating; crockpots and steam tables are not. After rapid heating, hot food can be placed in a crockpot or steam table for hot holding only. \_\_\_\_\_  
\_\_\_\_\_

How will cold foods be kept cold (below 41°F) or frozen? \_\_\_\_\_  
\_\_\_\_\_

Describe your handwashing station set up: \_\_\_\_\_  
\_\_\_\_\_

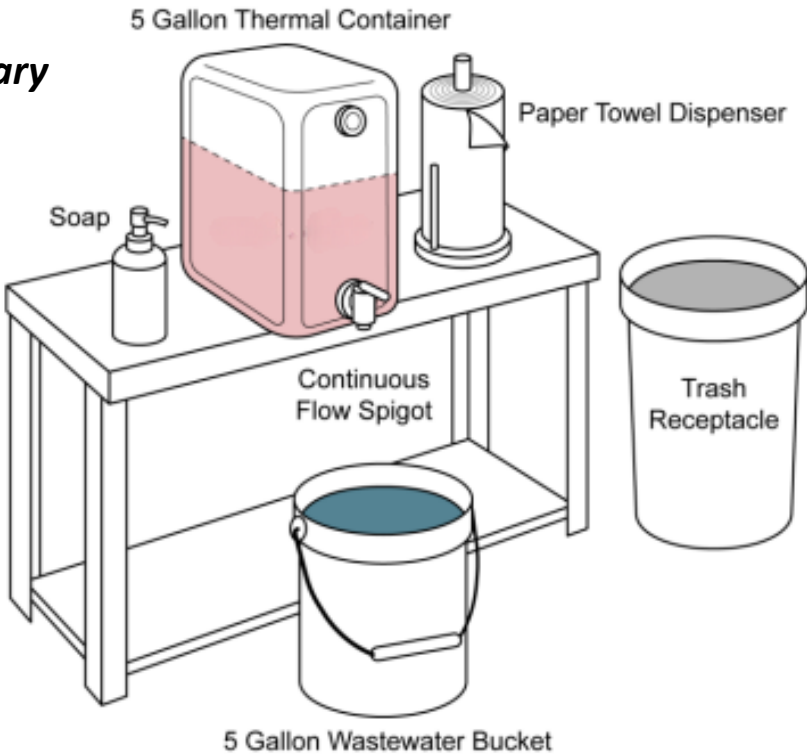
Describe your dish washing station set up: \_\_\_\_\_  
\_\_\_\_\_

 *Must be filled out completely with BOTH phone and email.*

Describe your procedure to avoid bare hand contact with ready-to-eat food (i.e. deli tissues, tongs, spoons, forks, spatulas shall be used): \_\_\_\_\_

How will hot water for handwashing and clean-up be provided? When other facilities are not available, a coffee pot can be used to heat water. \_\_\_\_\_

**Example of temporary hand sink set up:**



## **Temporary Booth Setup - What To Bring**

### **• DISHWASHING**

- Sanitizer (for 3-bin dishwashing and wiping off surfaces)
- Sanitizer test strips (QUAT or Chlorine - see example, next page)
- Dish soap
- 3 labeled bins for washing, rinsing, sanitizing

### **• HANDWASHING**

- Water dispenser with spigot
- Hand soap (you can use hand sanitizer in ADDITION to hand soap, not INSTEAD of)
- Single-use towels
- Bucket or tub to catch water when washing hands
- Small trash can for single-use towels
- Bucket and wiping cloth (for sanitizing food contact surfaces)
- Calibrated stem thermometer or digital thermometer, and alcohol prep pads
- Hair restraints and coverings (hats, hair nets, elastics) for all employees
- Risers or crates for storing items at least 6 inches off the ground
- Food-grade containers for storing, mixing, etc.
- Food-grade coolers, if serving drinks with ice (or storing ice in coolers)
- Ground covering, if utilizing grease-producing equipment (fryers)
- Plenty of non-latex gloves (so they can be changed frequently)
- Containers with lids to keep supplies dry and clean (containers must be clean as well)
- Safe, adequate water supply from regulated source. Private wells must be tested and pass prior to event

## **Personnel**

- An informed Person in Charge (PIC) must be present at all times
- Workers MUST wash hands upon beginning work
- Workers must have clean clothing, short, clean nails, and hair restraints
- Workers do not touch ready-to-eat foods with bare hands
- Workers may not work if they have any symptoms of illness, especially diarrhea or vomiting within the past 24-hours, or symptoms of sore throat and fever

## **Food**

- KEEP YOUR MENU SIMPLE
- No home-prepared foods can be used or sold
- All meats/poultry/fish/prepared foods must come from an approved source
- Raw animal products must be stored separately from ready-to-eat foods
- All preparation must be done on site or in a licensed kitchen
- Check temperatures frequently, all cold foods must be at or below 41°F at all times
- Ice must be from an approved source or store and must be protected from bare hand contact
- Do not cook foods in advance (cook, cool, or reheat) unless prior approval from the health department
- The public is not permitted to help themselves unless proper food barriers or sneeze guards are provided
- Leftovers are not permitted to be used or sold; must be discarded by the end of the day

- Storage of prepackaged foods in coolers with undrained ice or water is prohibited
- Foods are to be thawed in refrigeration units at temperatures not to exceed 41°F, under cool, running water (not to exceed 70°F) or in a microwave oven as part of the cooking process

## Minimum Internal Cooking Temperatures

Poultry and Stuffed Meats.....	165°F
All Ground Meats (pork, beef, lamb).....	155°F
Pork, Beef, Lamb Steaks.....	145°F
Commercially packaged, pre-cooked foods, all hot holding.....	135°F

***Examples of QUAT and Chlorine Test Strips***



# Contents and Format of Plans and Specifications

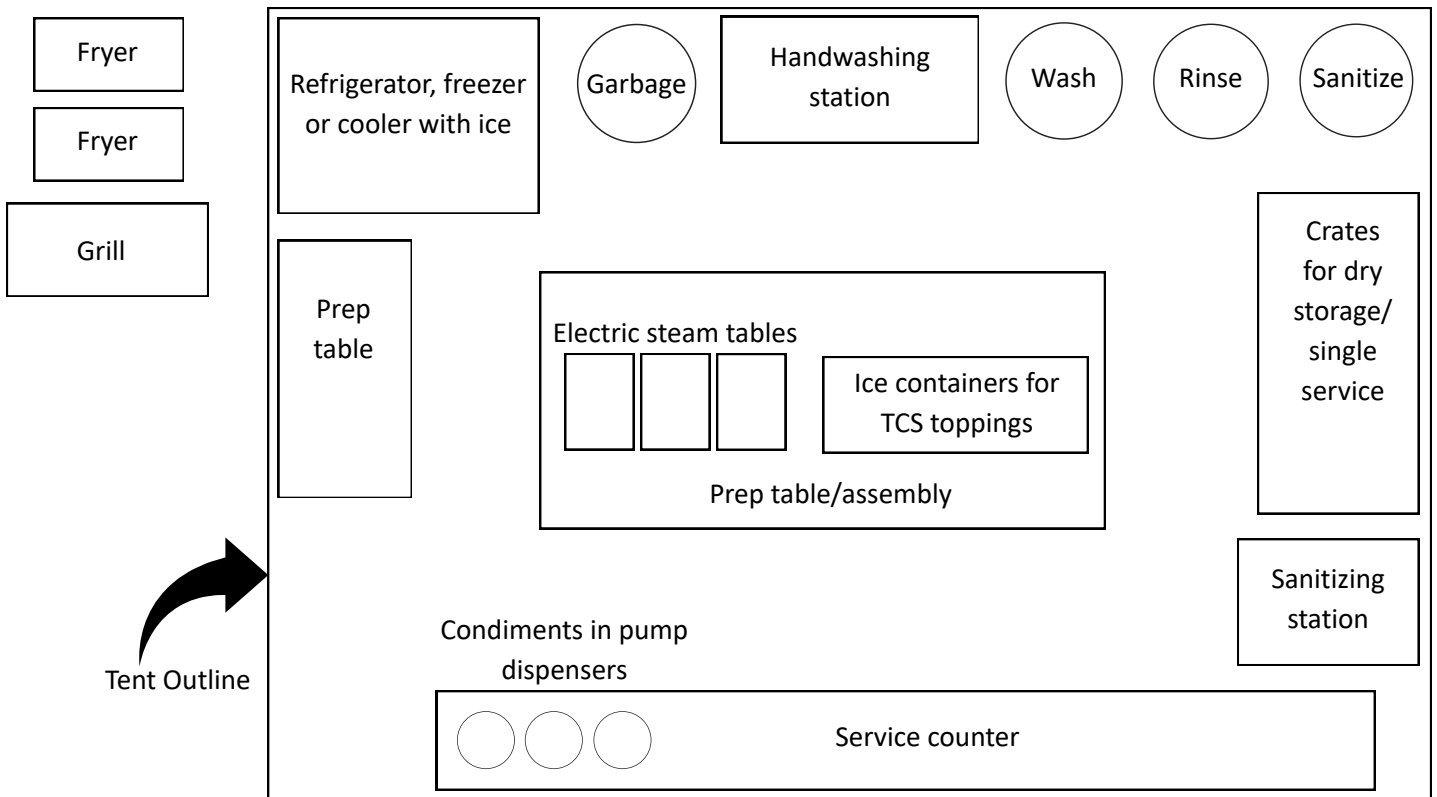
## Layout

- Each piece of equipment must be clearly labeled on plan layout with a common name
- 3-compartment sink large enough to accommodate 50% of largest piece of equipment
- Include any additional storage trailers and/or additional refrigerated trucks necessary for operation

## **ATTACHMENTS**

**Booth/Vehicle Layout:** Submit a drawing of your booth or vehicle layout for the event. Identify any equipment that will be used, including, but not limited to: handwashing station, dishwashing set up, service counter; preparation tables, cooking and hot holding equipment such as ovens, fryers, grills, and steam tables; cold holding equipment such as refrigeration and insulated coolers with ice; food and single-service storage methods; garbage can; and tent/overhead protection. If you are operating a mobile food establishment (food truck, trailer, or cart) that is licensed/permitted by another regulatory authority, then also upload a copy of the current health permit/license, and a copy of the last inspection report for the mobile food establishment, excluding any temporary permits.

### **Example of booth layout**



**THIS LETTER OF INTENT MUST HAVE A DRAWING OF YOUR  
TEMPORARY FOOD OPERATION SETUP (BELOW)**

Setup plan reviewed: **Approved:** \_\_\_\_\_ / \_\_\_\_/\_\_\_\_  
EHS Initials Date

**Disapproved:** \_\_\_\_\_ / \_\_\_\_/\_\_\_\_  
EHS Initials Date

**NOTE:** YOU MUST BE SET UP AND READY FOR INSPECTION AT THE TIMES / DATES SPECIFIED IN YOUR LETTER OF INTENT. FAILURE TO BE READY FOR INSPECTION OR NOT SHOWING UP ON THE DAY INDICATED IN YOUR LETTER OF INTENT **MAY RESULT IN YOU NOT BEING ABLE TO PARTICIPATE AT THIS EVENT.**

**QUESTIONS:** CONTACT BRIDGETT SIGMAN AT 937-374-5607 OR EMAIL [FOOD@GREENECOPHOH.GOV](mailto:FOOD@GREENECOPHOH.GOV) BETWEEN 8:00AM & 4:00PM, MONDAY THROUGH FRIDAY.