

Food Safety Program Application for Permit to Operate a Temporary Food Establishment (TFE)

REQUIRED SUBMITTAL ITEMS:	COMPLETED AND SIGNED APPLICATION NO LESS THAN 14 DAYS PRIOR TO THE EVENT Note: New applications received less than 14 days prior to date of event may be charged a 100% penalty. Applications received less than three days prior to date of event may not be processed.					
OFFICE USE ONLY						
Permit #	Category		Fee \$		Invoice #	
Delivery Permit Method:	Email	Hand Delivered	Mail	Date:		
Permit by	_Date	Approved by	[Date approve	d	
PERMIT VALID DATE(S): START			EXPIRES			
		APPLICANT IN	FORMATION			
Permit Name (the name of the l	booth etc. to be printe	ed on the permit):				
Name of Business/Organization	(if different than perm	nit name):			Phone:	
Mailing Address:					DOB:	
Applicant Name:			Phone:			
Email:						
Mailing Address:						
Name of On-Site Person in Charge (PIC): (Check if same as applicant) Cell:			Email:		:	
Have you previously operated a temporary food establishment in Spokane County? Yes No IF YES, LIST EVENT NAME(S) AND DATE(S):						
		EVENT INFO	ORMATION			
Event name(s):	Location:					
Event address(es):						
Date of event(s):						
Food service start and end time p.m.):	(indicate a.m. or	Email:				
Event coordinator:						
Do you have any other planned events in Spokane County? Yes No IF YES, LIST EVENT NAME(S) AND DATE(S):						
FACILITY TYPE						
Food booth Food tru	🗌 Food booth 🗌 Food truck/trailer 🗋 Food cart 🗋 WA State L & I approval for trucks/trailers 🗌 Permanent facility 🗋 Other (specify):					
FACILITY OPERATION TYPE						
Pre-packaged Pre-packaged with sampling Food demonstration with sampling Food preparation and distribution						



Food Safety Program

				rEMS re served during the permit cyo rgers, macaroni & cheese	le.	
1.				6.		
2.			-	7.		
3.			:	8.		
4.			!	9.		
5.			1	0.		
Submittal Require	ements:	Any changes/add All food preparat	ion shall be completed		prior to the event.	day.
Food item List all separate ingredients for above menu items and include corresponding menu item number	Source Indicate where the food item is purchased	Check if commercially pre-packaged Only check if item will be sold in original packaging	Raw animal products or commercially pre-cooked Indicate if the item is purchased raw or commercially pre- cooked	Identify types of preparation at other location prior to the event List methods of preparation for menu item (e.g., wash, cut, cook, cool)	Identify types of preparation at event List methods of preparation for menu item (e.g., cook, hot hold, cold hold) NO COOLING ALLOWED	Transported to the event hot or cold? 41°F or less for cold holding. 135°F or greater for hot holding or N/A for non-TCS foods.
						Non-TCS Below 41°F Above 135°F N/A
						Non-TCS Below 41°F Above 135°F N/A
						Non-TCS Below 41°F Above 135°F N/A
						Non-TCS Below 41°F Above 135°F N/A
						Non-TCS Below 41°F Above 135°F N/A
						Non-TCS Below 41°F Above 135°F N/A
						Non-TCS Below 41°F Above 135°F N/A
						Non-TCS Below 41°F Above 135°F N/A



FOOD PREPARATION CONTINUED						
Submittal Requirements: Only food items listed below are approved for service. Any changes/additions to this menu must be pre-approved prior to the event. All food preparation shall be completed in TFE or in facility approved prior to the event. No home preparation of foods is allowed. All hot food musd includet be discarded at the end					nd	
Food item Source Check if Raw animal Identify types of Identify types					Transported to the	
List all separate ingredients for above menu items and include corresponding menu item number	Indicate where the food item is purchased	commercially pre-packaged Only check if item will be sold in original packaging	products or commercially pre-cooked Indicate if the item is purchased raw or commercially pre- cooked	preparation at other location prior to the event List methods of preparation for menu item (e.g., wash, cut, cook, cool)	of preparation at event List methods of preparation for menu item (e.g., cook, hot hold, cold hold) NO COOLING ALLOWED	event hot or cold? 41°F or less for cold holding. 135°F or greater for hot holding or N/A for non-TCS foods.
						□Non-TCS □Below 41°F □Above 135°F □N/A
						□Non-TCS □Below 41°F □Above 135°F □N/A
						□Non-TCS □Below 41°F □Above 135°F □N/A
						□Non-TCS □Below 41°F □Above 135°F □N/A
						□Non-TCS □Below 41°F □Above 135°F □N/A
						□Non-TCS □Below 41°F □Above 135°F □N/A
						□Non-TCS □Below 41°F □Above 135°F □N/A
						Non-TCS Below 41°F Above 135°F N/A

If additional menu items will be served, attach additional pages including the above listed preparation information.

FOOD PREPARATION, STORAGE, AND WAREWASHING AT APPROVED FACILITY				
Will advance food preparation take place in a location other than TFE: Yes No				
Name of approved facility:	Phone:			
Address of facility:				
Is any food preparation regulated by another agency: 🗌 Yes 🗌 No If yes, indicate agency: 🗌 WSDA 🗌 USDA 🗌 Other (specify):				
If the owner of the facility is different than TFE applicant, a completed commissary agreement must be submitted.				



EQUIPMENT INFORMATION							
Cold holding	Refrigerator Refrigerated truck Dry ice/cooler Ice/cooler Other (specify): Time/temperature Control for Safety (TCS) FOODS MUST BE COLD HELD AT 41 F OR BELOW						
	🗌 Grill 🔲 Stovetop 🔲 Deep fryer 🗋 Oven 🗋 Wok 🗋 Barbeque grill/smoker 📄 Roaster oven/crockpot 🔲 Rice cooker						
Cooking	Hot dog roller Other (specify):						
	NO UNATTENDED COOKING						
	Steam table 🗌 Chafing dishes 🗌 Rice cooker 🗌 Roaster oven/crockpot 🗌 Hot case 🔲 Hot dog roller 🔲 Oven						
Hot holding	Other (specify):						
	NO UNATTENDED HOT HOLDING						
Method of	Insulated food-grade container Original packaging Hot case Refrigeration Non-insulated food-grade container						
hot/cold holding	Delivered to event by commercial vendor, indicate vendor:						
during transportation	Other (specify):						
	FOOD PROTECTION						
Method of	Gloves Utensils Deli Tissue Other (specify):						
preventing bare	BARE HAND CONTACT WITH READY-TO-EAT FOOD IS NOT ALLOWED						
hand contact Method of food							
protection during	Sneeze guards 🔲 Continuous active monitoring by food worker 🔲 Only pre-packaged food or bottled drink						
operation:	Other (specify):						
Storage of	In ice water below 41°F In hot water above 135°F I Dipper well Utensils replaced no less than every 4 hours						
utensils between	Washed/rinsed/sanitize no less than every 4 hours (must be stored on clean food grade surface, required for ice scoops)						
uses	Stored in food (handles above top of food, scoops may not be stored in ice used for beverage service) Disposable						
	□ Other (specify):						
WATER SOURCE AND DISPOSAL							
	Public Commercially-bottled						
Water source	Other (specify):						
	HOSES USED TO CONVEY POTABLE WATER MUST BE FOOD-GRADE AND STORED TO PREVENT CONTAMINATION						
Water disposal	Mop Sink Direct connection to public sewer On-site waste disposal provided by event						
information	Holding Tank (specify method of disposal):						
	DO NOT DISCHARGE WASTEWATER INTO STORM DRAINS, TOILETS, URINALS, OR ON THE GROUND						
	SINK REQUIREMENTS						
Warewashing	If the establishment operates for two or more consecutive days or if utensils are re-used on site, a plumbed three compartment sink is required within 200 feet. A commissary location may be used for warewashing. DISH TUBS ARE NOT ACCEPTABLE. Identify location of three compartment sink:						
Food preparation	Produce is purchased commercially pre-washed (invoices must be available for review by the regulatory authority)						
(for wash, soak, rinse, drain, thaw	Designated food preparation sink is provided by the event (must be indirectly drained)						
of food items)	Designated food preparation sink is provided by applicant (must be indirectly drained)						
	Food prepared at approved kitchen (Commissary agreement required if owner of facility is different than applicant)						
Handwashing	No less than 5-gallon insulated container with free-flowing spigot and no less than 5 gallon catch bucket for waste water						
	Plumbed handwashing provided in establishment accessible to food workers						
	AN ADDITIONAL HANDWASHING SETUP MAY BE REQUIRED FOR ESTABLISHMENTS PREPARING RAW ANIMAL PRODUCTS OR LARGE/COMPLEX OPERATIONS WARM POTABLE WATER, SOAP, PAPER TOWELS, AND HANDWASHING REMINDER SIGN REQUIRED						



ESTABLISHMENT CONSTRUCTION

Floor Material:

Ceiling Material:

Wall Material:

Food Preparation Surfaces/Storage Material:

ALL SURFACES MUST BE SMOOTH, DURABLE, NON-ABSORBANT AND EASILY CLEANABLE

TEMPORARY FOOD ESTABLISHMENT LAYOUT

PROVIDE A TOP VIEW SKETCH OF ESTABLISHMENT

ALL EQUIPMENT, WORK AREAS, STORAGE AREAS, SINKS, FOOD PROTECTION EQUIPMENT AND SANITIZER LOCATION MUST BE INCLUDED ALL ACTIVITIES AND FOOD STORAGE AT THE EVENT MUST TAKE PLACE IN THE TEMPORARY FOOD ESTABLISHMENT AND UNDER OVERHEAD COVER



ADDITIONAL REQUIREMENTS					
The permit holder agrees to	ensure the following:				
Yes No	1. No bare hand contact with ready-to-eat foods.				
Yes No	 Sanitizer and appropriate test strips must be provided. Indicate type of sanitizer used: Bleach Quaternary Ammonium Other (specify): 				
Yes No	3. Accurate digital thermometer with a suitable diameter probe designed to measure the temperature of thin foods or a dial stem thermometer must be provided; indicate type: Dial stem Digital				
Yes No	4. Employee restrooms with handwashing must be provided within 200 feet.				
Yes 🗌 No	5. Ill food workers must be excluded.				
🗌 Yes 🗌 No	6. Garbage with lid must be provided.				
🗌 Yes 🗌 No 🗌 N/A	7. Lighting in food preparation and storage area must be shielded or shatter-resistant.				
🗌 Yes 🗌 No 🗌 N/A	8. Adequate power supply must be provided for electrical equipment.				
Yes No	9. Food and single-service items must be stored no less than 6" off the ground and AWAY FROM CHEMICALS.				
Yes 🗌 No 🗌 N/A	10. Adequate set-back for grills and other cooking equipment is required to prevent contamination and to protect the public.				
Yes No	11. A designated PIC must be present at all times during operation and food service and person in charge must have current Washington State Food Worker Card available for review by regulatory authority.				
🗌 Yes 🗌 No	12. Permit must be posted.				

		INTERVIEW				
rior to permitting, the PIC will be required to complete an interview with a food safety inspector. The goal of the interview is to discuss your proposed menu, ood preparation and operation so we can assist you in safely preparing and serving food. The PIC should be prepared to answer detailed questions about food ources, food preparation steps, food service steps, establishment set up and equipment, and temporary hand wash set ups.						
The interview will be scheduled based on your availability as designated below (morning = 8:00 a.m. – noon; afternoon = noon – 4:00 p.m.):						
Mondays 🗌 morning 🗌 afternoon Thursdays 🗌 morning 🗌 afternoon	· _	morning 🔲 afternoon norning 🗌 afternoon	Wednesdays 🗌 morning 🔲 afternoon			
Vhat phone number should we call for the interview?						

Within 3 business days of receiving your application, SRHD will send you an email notifying you of your scheduled interview day and time, any additional information required prior to the interview and the fee for your TFE. Additional information requested and the permit fees are due before the interview.

SUBMITTAL INSTRUCTIONS

Applications may be submitted to Spokane Regional Health District:

BY MAIL OR IN PERSON: 1101 W College Ave, Room 402, Spokane, WA 99201-2095

BY FAX: 509-324-3603

BY EMAIL: foodsafetyprogram@srhd.org

SIGNATURES

By signing this form, you attest to the accuracy of the information provided, affirm that you will comply with WAC 246-215, and will allow Spokane Regional Health District (SRHD) access to the establishment and its records as specified in WAC 246-215. You understand that failure to submit complete information, complete the scheduled phone interview and/or failure to pay permit fees when due may result in penalty fees, required changes to your operation and/or postponing your event. You agree to notify SRHD in advance of changes in menu, equipment, operation, or ownership.

Incomplete applications will not be processed.

 Signature of applicant:
 Date:

 Printed name:
 Phone:

Beginning January 1, 2024, a 3.25% service fee will be added to all credit and debit card transactions. To avoid the service fee, we also accept payment by cash or check.

Spokane Regional Health District assures nondiscrimination in accordance with Title VI of the Civil Rights Act of 1964 and the Americans with Disabilities Act. To file a complaint or to request more information, reasonable accommodations, or language translations, contact 509.324.1501 or visit srhd.org.

