



2019 TEMPORARY FOOD EVENT (TFE) VENDOR INFORMATION AND APPLICATION

INSTRUCTIONS AND INFORMATION FOR TFE VENDORS

1. TFE vendor obtains **TFE vendor information and application** from event coordinator or from the Health Department webpage: <http://dcopublichealth.org/services/environmental-health/forms-applications> .
2. **TFE Coordinator application** must be submitted before vendor applications are accepted.
3. Vendor reviews **TFE FAQ** and completes **TFE vendor application**.
4. A **commissary agreement form** must be completed for approval if food will be prepared in advance.
5. No food shall be prepared in a home kitchen.
6. No food preparation or food sales shall occur at the booth before the permit is issued.
7. The completed **TFE vendor application**, commissary agreement and the \$75.00 permit fee is submitted to the Environmental Health Office **at least fifteen (15) calendar days before the event. State law does not allow late applications to be accepted for processing.**
8. The TFE will receive and inspection on the day of the event from an Environmental Health Specialist. Vendors who meet the requirements will be issued a permit.

Submit the completed application pages 2 through 7 and fees to:

- Human Services Building
- Environmental Health Division second floor
- 414 East Main Street
- Durham, North Carolina 27701
- Email: healthinspector@dconc.gov
- Fax (919) 560-7830
- Call (919) 560-7800
- **Please indicate how payment will be made:**
 - In person by visiting our office
 - US mail
 - Online (an invoice will be sent)
- **No counter checks will be accepted**





Public Health

Date Received: (office use only);

Contact Name:

Best Contact Number:

Durham County Temporary Food Establishment (TFE) Vendor Application

NC Rules Governing the Food Protection and Sanitation of Food Establishments 15A NCAC 18A .2600 defines a temporary food establishment as “a food establishment that operates for a period of time not to exceed 30 days in one location, affiliated with and endorsed by a transitory fair, carnival, circus, festival, or public exhibition.”

By providing the information below, you will assist in identifying and preventing potential public health problems that might occur during your event.

This application must be submitted at least 15 calendar days before the event, or the application will be denied. Vendors must fill out and return all pages, including a diagram depicting the layout of the food service area, along with the non-refundable fee of \$75 (per booth) to the health department for review/pre-approval.

Mobile Food Units and Push Carts that hold a valid NC Permit may qualify to operate without paying the fee for a single day event if approved; however, this application is still required for all food vendors participating at the event. Be sure to consult with Fire Marshal and other entities about other requirements for your food booth.

Event Information

Name of Event:				
Location:				
Dates / Times of Event:	Begin Date:		End Date:	
	Begin Time:		End Time:	
Time of Completed Set-up:				

Food Vendor Information

Business Name:				
Applicant Name:				
Address:				
City:		State:		Zip:
Daytime Number:		Cell Number:		
Email Address:				
Check the box that best describes your food vending set-up:				
<input type="checkbox"/> 3-sided (tent walls) tent	<input type="checkbox"/> trailer/self-contained unit	<input type="checkbox"/> building/indoor event		

Food Handling Information

Will any items be stored offsite?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what/where	
Equipment to be used at the event for:	Cooking:	
	Reheating:	
Indicate time and distance to travel with food product:	(hours : minutes) / (miles)	
Indicate how food temperatures will be maintained during transport to the event <i>(check all that apply)</i>		
<input type="checkbox"/> Cooler w/ice <input type="checkbox"/> Refrigerated truck <input type="checkbox"/> Cambro <input type="checkbox"/> Insulated heat bags <input type="checkbox"/> Other <i>(describe)</i> :		

Source of ice *(check all that apply)*: Commercially bagged ice
 From permitted TFE commissary

Source of water: Public water provided by organizer Sealed bottled water
 Water from permitted TFE commissary

Select the options below that best describe the disposal methods for the following:

Wastewater	Garbage
<input type="checkbox"/> Event providing grey water disposal bin <input type="checkbox"/> Onsite sewer system approved for use <input type="checkbox"/> Taking back to approved TFE commissary	<input type="checkbox"/> Event providing dumpsters/pick up <input type="checkbox"/> Other <i>(describe)</i> :

Select the options below that best describe the equipment in your set-up:
(utensil washing, and hand wash set up is required)

Cold Holding	Hot Holding	Utensil Washing	Handwashing
<input type="checkbox"/> Refrigerated truck <input type="checkbox"/> Household refrigerator <input type="checkbox"/> Commercial refrigerator <input type="checkbox"/> Household freezer <input type="checkbox"/> Commercial freezer <input type="checkbox"/> Cooler w/ drain port <input type="checkbox"/> Other ():	<input type="checkbox"/> Steam table <input type="checkbox"/> Grill <input type="checkbox"/> Electric hot box <input type="checkbox"/> Chafing dish <input type="checkbox"/> Other ():	<input type="checkbox"/> Plumbed 3-compartment sink <input type="checkbox"/> Plumbed 3-utility sink <input type="checkbox"/> 3 basins <input type="checkbox"/> Other ():	<input type="checkbox"/> Plumbed sink <input type="checkbox"/> Makeshift station w/flowing faucet (i.e., igloo cooler w/ turn spout) <input type="checkbox"/> Other ():

Check the box which describes your food booth set up:

3-sided (tent walls) tent () x () with front sneeze guards and fans. In order to protect food from contamination, tent access must be restricted from the public.

Trailer/Self Contained Unit

Building/Indoor Event

Will any food and/or drink be prepared prior to event? This includes washing vegetables, cutting or marinating meat, or cooking at a permitted temporary food establishment commissary (TFE).

No; Foods will be packaged

Yes; All foods prepared must be prepared in a permitted temporary food establishment commissary (TFE); not a home kitchen. Application must include letter from TFE owner/operator

Check the type of lighting that will be at food service/storage areas:

Shielded/Sleeved bulbs Shatterproof bulbs

TEMPORARY FOOD EVENT (TFE) VENDOR INFORMATION AND APPLICATION

**By signing below, I hereby certify that the above information is complete and accurate.
I fully understand the following:**

- All potentially hazardous foods will be discarded at the end of the day unless a pre-approved cooling system and commercial refrigeration/freezer is in place.
- Any deviation from the above without prior written permission from Durham County Public Health may nullify final approval and prevent issuance of a TFE permit.
- A pre-opening inspection (with electricity and equipment in place) of the TFE will be required before a permit will be issued.
- Food/drink that is prepared before permitting (without prior approval from Durham County Public Health) may result in disposal or embargo of the food/drink.
- Failure to maintain approved temperatures for potentially hazardous foods may result in disposal or embargo of food.
- Approval of this application does not indicate compliance with any other code, law, or regulation that may be required. (i.e., Fire Marshall, federal, state, and local authorities)
- Pre-approval of this application does not guarantee acceptance into the event and no refunds are given.
- TFE application with menu and layout and required fee must be received by Durham County Public Health at least 15 calendar days prior to the event or the application may be denied.
- Incomplete applications will be denied and returned.
- Any deviations from approved set-up or food safety hazards may result in permit actions and possible removal from event.
- TFE Coordinator application must be submitted, by person(s)-in-charge of event, to the office (30 days prior to event) for the vendor applications to be reviewed.

Print Name _____ Date _____

Signature _____ Date _____

FORM 1-B Conditional Employee or Food Employee Reporting Agreement

The purpose of this agreement is to inform conditional employees or food employees of their responsibility to notify the person in charge when they experience any of the conditions listed so that the person in charge can take appropriate steps to preclude the transmission of foodborne illness.

I AGREE TO REPORT TO THE PERSON IN CHARGE:

Any Onset of the Following Symptoms, While Either at Work or Outside of Work, Including the Date of Onset:

1. Diarrhea
2. Vomiting
3. Jaundice
4. Sore throat with fever
5. Infected cuts or wounds, or lesions containing pus on the hand, wrist, an exposed body part, or other body part and the cuts, wounds, or lesions are not properly covered (*such as boils and infected wounds, however small*)

Future Medical Diagnosis:

Whenever diagnosed as being ill with Norovirus, typhoid fever (*Salmonella Typhi*), shigellosis (*Shigella* spp. infection), *Escherichia coli* O157:H7 or other EHEC/STEC infection, or hepatitis A (hepatitis A virus infection)

Future Exposure to Foodborne Pathogens:

1. Exposure to or suspicion of causing any confirmed disease outbreak of Norovirus, typhoid fever, shigellosis, *E. coli* O157:H7 or other EHEC/STEC infection, or hepatitis A.
2. A household member diagnosed with Norovirus, typhoid fever, shigellosis, illness due to EHEC/STEC, or hepatitis A.
3. A household member attending or working in a setting experiencing a confirmed disease outbreak of Norovirus, typhoid fever, shigellosis, *E. coli* O157:H7 or other EHEC/STEC infection, or hepatitis A.

I have read (or had explained to me) and understand the requirements concerning my responsibilities under the Food Code and this agreement to comply with:

1. Reporting requirements specified above involving symptoms, diagnoses, and exposure specified;
2. Work restrictions or exclusions that are imposed upon me; and
3. Good hygienic practices.

I understand that failure to comply with the terms of this agreement could lead to action by the food establishment or the food regulatory authority that may jeopardize my employment and may involve legal action against me.

Conditional Employee Name (please print) _____
Signature of Conditional Employee _____ Date _____
Food Employee Name (please print) _____
Signature of Food Employee _____
Signature of Permit Holder or Representative _____ Date _____

TEMPORARY FOOD EVENT (TFE) MENU

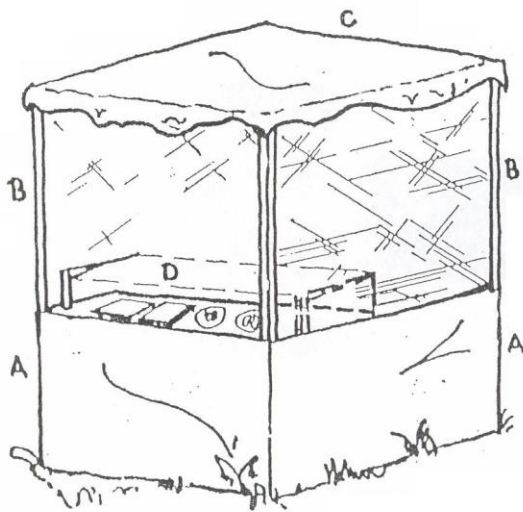
Menu Chart: Provide a complete list of food/menu items. Please note that a produce sink is required for all produce that is not purchased prewashed. This includes lettuce, lemons, potatoes, onions etc. Raw meat, poultry, and seafood shall be purchased in ready to cook forms. Attach additional sheet if needed.

Attachment 1: Menu

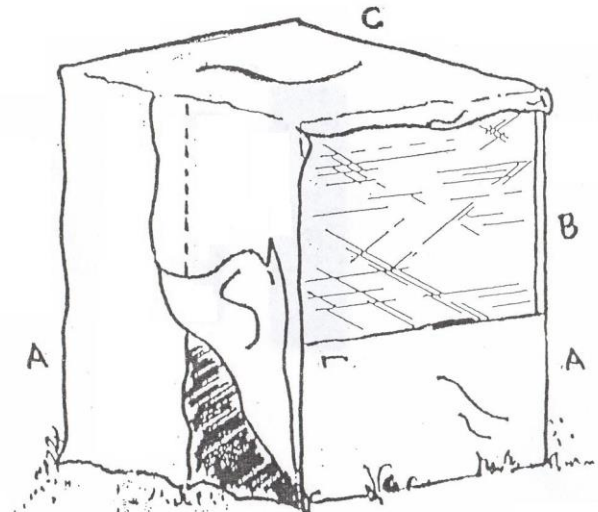
FOOD ITEM	FOOD SUPPLIER OR SOURCE	THAWING HOW? WHERE?	CUT/WASH/ ASSEMBLE WHERE?	COOKING HOW? WHERE?	COLD/HOT HOLDING HOW/WHERE?	REHEATING HOW?
hamburger	IQF from Sam's Club	no thawing needed	no advance prep needed	on grill at the event	hold in crockpot with beef broth	no reheating needed

ITEMS NOT INCLUDED ON THIS LIST ARE CONSIDERED UNAPPROVED AND SUBJECT TO DISPOSAL ON SITE.

TEMPORARY FOOD STAND



FRONT VIEW



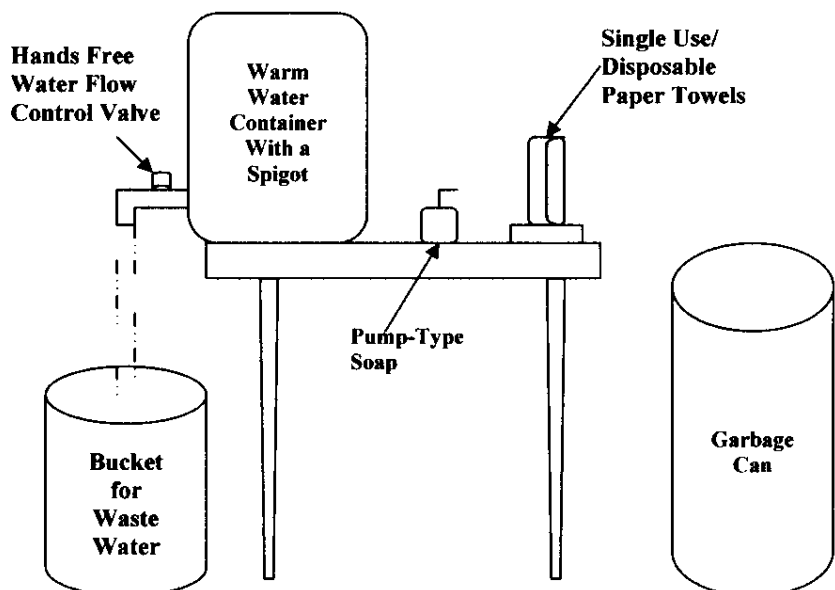
REAR VIEW

- A- SOLID MATERIAL
- B- SCREEN
- C- SOLID ROOF
- D- SNEEZE GUARD

PROPER BOOTH CONSTRUCTION

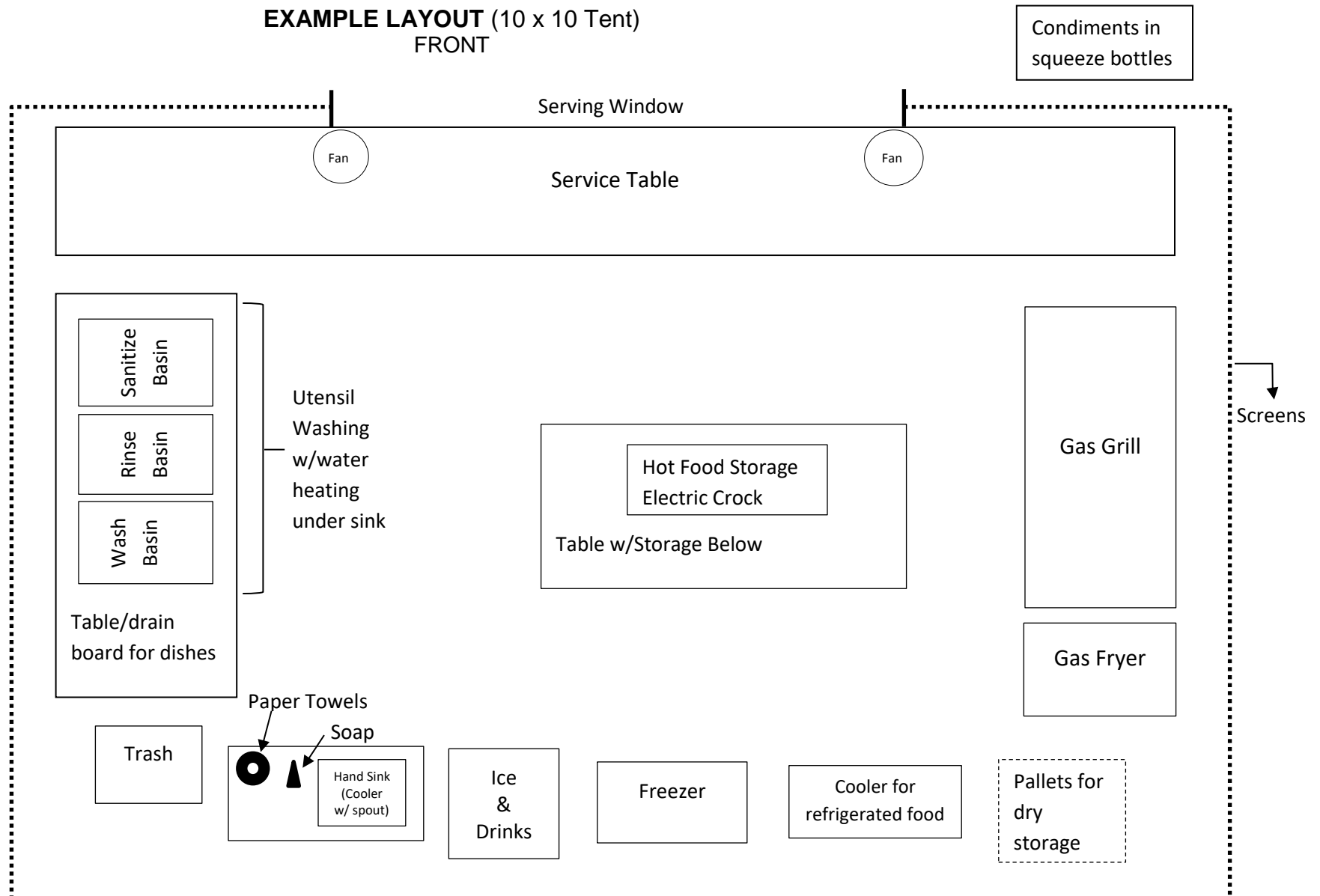
TEMPORARY HANDWASHING DIAGRAM

A temporary handwashing station is required at all permitted temporary food facilities. This must be set up **prior** to any food preparation. Provide a container with a spigot that allows hands-free flowing water, a waste water bucket, a pump-type soap dispenser, single use/disposable paper towels, and a garbage can for disposable paper towels. All food workers must wash their hands when they return to the concession stand/booth and after using the restroom, after eating, smoking, or handling unclean items.



Attachment 2: Layout

All food preparation is to take place in an area that is clean and protected by an overhead covering. Cooking and serving equipment is to be positioned so that the food is not exposed to the public otherwise shields or sneeze guards must be provided. The diagram below is an EXAMPLE only. Please indicate ALL equipment that you will be using including what will be used to store cold foods and hot foods. For cooking equipment, indicate if gas, electricity or charcoal will be used. Applications submitted without completed drawing will be **denied**.



Draw your layout in this space.

Temporary Food Establishment Evaluation Checklist

***Unless written documentation is provided in application, no food preparation (processing, cutting, marinating, cooking, etc) is to be done prior to receiving a permit.** All food must be in the original packaging with labeling which includes the identity of the product and the source. All meat packaging must include the appropriate USDA inspection mark. Any food that has been prepared or removed from the original package prior to receiving a permit will be **immediately discarded.**

*\$75.00 permit fee and application must be received at least fifteen (15) calendar days before the event at the Durham County Public Health Dept. prior to obtaining a permit.

*Disposing of grease or wastewater on the ground or in storm drains is against the law. If grease receptacles are on site, they must be used. Sewer connections or approved container services must be used.

- _____ Water properly connected. Drinking water safe food grade hoses are required for water connections. Hoses must be sanitized prior to use. Hoses must be labeled.
- _____ Ice makers including those in trailers/trucks, must be emptied, cleaned, sanitized prior to use.
- _____ Wastewater properly disposed. Sewer connections if available on site. Hoses used for wastewater must be labeled.
- _____ Hot water at a minimum of 120°F at utensil sinks (minimum 100°F-110°F at hand sinks). Wash water in the utensil sink must be maintained at 110°F.
- _____ Separate hand sink or cooler with pour spout with soap and paper towels at all food handling areas.
- _____ 3 vat sink or 3 basins of sufficient size to completely submerge utensils and counter space/drain board for the air drying of utensils.
- _____ Sanitizer available. Mix water and bleach (no scented/splashless bleaches) to make a 50-200ppm chlorine solution or other approved sanitizer; quaternary ammonia 200-400ppm.
- _____ Sanitizer test strips must be available; Chlorine or Quaternary Ammonia
- _____ Thermometers in refrigerators. Air temperature 35°F-40°F (Food 45°F or below).
- _____ Thermometers for checking food temperatures. Metal stem food thermometers should read 0°F-220°F or is digital. Cold foods must be kept 45°F or below (41°F or below by 2019).
- _____ Foods from approved sources. Any food requiring advanced preparation prior to the event must be prepared in a permitted TFE commissary.
- _____ Food stored off the floor/ground and covered. Corn, potatoes, onions, etc. must be stored on a pallet or other approved means and must be kept covered.
- _____ All food handling and cooking must be done in a protected area. This area shall have overhead coverage. Any separate food preparation areas must be provided with hand sinks.
- _____ Means to prevent bare hand contact with ready-to-eat food (food grade gloves, utensils, or deli paper).
- _____ Outside storage (supplies, refrigerators, freezers) must be protected. Any supplies or equipment not inside a building or trailer or under a tent must be covered.
- _____ Open food displays must be protected from contamination by sneeze guards or other barriers.
- _____ Fans, screens, or other effective means to keep out insects, flies, and dust.
- _____ Ice scoops and a separate bin for ice used in beverages must be provided.
- _____ Consumer Advisory must be posted for raw or undercooked animal products being offered.
- _____ Lighting must be shielded or shatterproof.
- _____ Effective hair restraints (ball cap or hairnet).
- _____ Employee health policy in place.

Durham County Public Health Department will be on site prior to the beginning of the event.
Questions may be addressed to (919) 560-7800 or healthinspector@dconc.gov



Temporary Food Establishment Commissary Agreement

15A NCAC 18A .2665 Temporary Food Establishment and Temporary Food Establishment commissary permit requirements

Completed by the permittee or owner of the restaurant located in Durham County:

Temporary Food Event Vendor name: _____

Temporary Food Event: _____

Dates and times for commissary use: _____

Phone number: _____ Email: _____

I understand that as a commissary for the Temporary Food Event vendor, I will provide the following:

- I will provide a designated protected area for food and utensil storage, including refrigeration / freezer and dry storage area.
- I will label the designated storage spaces for the vendor's exclusive use.
- I will provide use of the utensil sink to wash utensils used on the unit.
- I will provide commissary access for Temporary Food Event vendor as necessary

The permittee or owner of the restaurant facility noted below agrees to serve as a commissary for the Temporary Food Event vendor named above.

Restaurant Name Serving as Commissary: _____

Restaurant Address: _____

Restaurant Phone Number: _____

Email: _____

Date: _____

Printed Name of Restaurant Owner / Permittee:

Date: _____

Signature of Restaurant Owner / Permittee:

