FI-231 (07/14)

MICHIGAN TEMPORARY FOOD ESTABLISHMENT LICENSE APPLICATION

APPLICANT/BUSINESS CONTACT INFORMATION:

Organization/Business Name: _____

Main Contact: _____ Email:_____

Mailing Address: _____ City:_____ State: ____ Zip:_____

Primary Phone: _____ Cell Phone: _____ Fax :_____

Alternative Contact: Name: _____ Phone: _____

PUBLIC EVENT INFORMATION: Name of Public Event: _____

Food Service Start Date: _____/_____/_____ Serving Start Time: _____ AM/PM

Ending Date: _____/_____/____ End Time: _____ AM/PM

When will food preparation begin? Date: _____/_____/_____ Starting Time: _____AM/PM

Event Location (Name & Address): _____

Event Coordinator Name: _____ Phone: _____

If Applicable, Non Profit Tax ID #: _____

I AM AWARE THAT EACH BOOTH MUST BE PROPERLY EQUIPPED AND READY TO OPERATE BY THE TIME INDICATED, AND THAT FAILURE TO DO SO MAY RESULT IN DENIAL OF MY LICENSE.

Applicant Name (Print)_____

Applicant Signature: _____ Date: _____

Estimated Number of Meals to be Served Each Day: _____

EQUIPMENT LIST:

Identify equipment used at your temporary food establishment. Check all boxes that apply.

A Hand Wash Station
- ❑ Large insulated container with a spigot, warm water, hand soap, paper towels and a large catch bucket
- ❑ Hand sink
- ❑ Self-contained portable unit
- ❑ Other _____

B Cooking/Reheating Equipment
- ❑ Grill/BBQ
- ❑ Fryer
- ❑ Oven
- ❑ Roaster
- ❑ Other _____

C Cold/Hot Holding Equipment
- ❑ Ice chest/cooler with ice
- ❑ Refrigerator
- ❑ Freezer
- ❑ Steam table
- ❑ Grill/BBQ
- ❑ Chafing dish w/ fuel
- ❑ Slow cooker/roaster
- ❑ Other _____

D Floor/Overhead Protection*
- ❑ Food is prepared & served indoors
- ❑ Floors are cleanable and Impermeable Describe: _____
- ❑ Canopy/tent
- ❑ Screening
- ❑ Other _____

E Cleaning/Sanitizing
- ❑ Three basins to wash (dish soap), rinse (clear water) and sanitize (sanitizer)
- ❑ Extra utensils
- ❑ Bucket with sanitizing solution and wiping cloth(s)
- ❑ Sanitizer

F Other
- ❑ Chemical test strips to test sanitizer solution
- ❑ Metal stem thermometer
- ❑ Gloves
- ❑ Hair restraints
- ❑ Electricity available
- ❑ Water source (circle all that apply)

  Municipal/City Water Well Bottled

*If extensive food handling occurs, it must be done in a fully enclosed space.

FOOD PREPARATION AND MENU: Only food and beverage items listed will be approved to serve.
Approval for any changes must be requested before the event.

Food	**G** Food Source (place/facility where food is purchased)	**H** Off-Site Prep Yes/No *1	**I** On-Site Prep Yes/No	**J** Transport to event? (Hot or Cold, What type of equipment for transport)	**K** Cold holding equipment used at event?	**L** Cooking/reheating equipment used? Final cook/reheat temperature?	**M** Cooling? *2	**N** Hot holding equipment used?
Example:								
Hamburger	Jane's Food Service	No	Yes	Cold, Ice Chest	On-site refrigerator	Grill, 155 °F	No	Steam table

*1 – IF FOODS ARE MADE OFF-SITE, PLEASE FILL OUT ADDENDUM A (COMMISSARY AGREEMENT)
*2 – IF YOU PLAN TO COOL ANY FOOD, CONTACT YOUR INSPECTOR TO DISCUSS THE METHOD YOU WOULD USE.

FOR LOCAL HEALTH DEPARTMENT USE:

Notes:

Amount Paid: _____ Receipt Number: _____

ADDENDUM A:

COMMISSARY AGREEMENT

Organizations or individuals requiring the use of an off-site kitchen facility must obtain a review and approval, by the licensing agency, of the off-site kitchen facility at the time of license application. Inspection fees may apply if the facility is NOT currently licensed as a permanent food establishment. If you change the commissary location prior to the event, notify the department to update the commissary agreement. It may be required that you provide a copy of the Commissary Food License.

Temporary Food Service Operator requiring the use of an off-site kitchen facility must complete the following information:

I, _____ allow _____
Licensed Food Service Operator/Owner *Organization*

to use_____ _____
Name & Address of Licensed Facility Used *Facility License Number*

For: _____ Food Preparation _____ Cold Food Storage _____ Cooking _____ Cooling Food _____ Hot Holding

_____ Dry Food Storage _____ Warewashing _____ Approved Water Supply _____ Waste water Disposal

_____ Other: _____

Date(s) Licensed Facility will be used for this event: _____ to _____ Time of use:_____ AM/PM to _____ AM/PM

_____ _____
Signature of Licensed Facility *Owner/Operator* *Date*

For Office Use Only

APPROVED _____ DENIED _____

COMMENTS: _____

TEMPORARY FOOD EVENT PLANNING CHECKLIST

The following is intended for guidance when setting up a temporary food establishment. Not all code violations are encompassed in this document. Please direct questions to our office.

	PRIORITY VIOLATIONS *Violations that can result in a denial of your license*
	All food preparation must take place on site during the duration of the license. Home prepared food is NOT allowed.
	Any food prepared before the day of the event must be prepared and stored at a licensed facility. Submit Attachment "A" of Temporary Application along with a letter from the licensed facility if another site will be used.
	All food and ice must be obtained from an approved source. Examples of approved sources are a grocery store, food service store, and USDA inspected meat products.
	Food must be purchased on the day of the event or prior arrangements made to store items at a licensed facility. Have purchase receipts available to show the inspector when and where food was purchased.
	Drinking/cooking water must be from an approved source. Garden hoses may not be used. For well water, a current lab analysis will be needed to show it is safe to drink.
	Hot and cold food must be transported and stored in a manner that maintains required temperatures at all times.
	Cold food must be at 41°F or below.
	Hot food must be held at 135°F or above after cooking.
	Gloves or utensils must be used to prevent bare hand contact with ready-to-eat food.
	Temporary hand washing supplies needed: Water container with free-flowing spigot, bucket for waste water, hand soap and paper towels
	Provide a spray bottle containing sanitizer and paper towels or bucket with bleach solution for sanitizing surfaces and utensils. Test strips for the sanitizer solution must be utilized.
	For utensils; a wash, rinse and sanitize station must be set up and utilized. Containers must be large enough to fit the biggest utensil or piece of equipment.
	Toxic items shall be stored separately from the food.
	Food thermometer with a range of 0-220ºF, accurate to ±2ºF is required.
	Food workers must be healthy and may not work with food if they are ill.

	CORE ITEMS *Violations that will be noted on the license for public viewing*
	Cooking equipment with enamel or Teflon surfaces cannot be scratched or peeling. Stainless steel is preferred.
	All food workers shall be informed that there must be NO eating, drinking or smoking in food prep areas.
	Hair restraints (hats or hairnets) for all people who will be handling food.
	Tables or other shelving available at the site for keeping food and supplies off of the ground or floor.
	Flooring or ground covering (i.e. tarp) to be located in the area of food preparation and storage if event is outdoors.
	Overhead roof, canopy or tent to be located above the food preparation and storage area.
	A place at the site to properly dispose of wastewater must be available.

HCS - Environmental Health Unit
311 East Alcott Street
Kalamazoo, MI 49001

Kalamazoo County Government
In the Pursuit of Extraordinary Governance...
Health and Community Services Department

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