

City of Plainfield



Application for Temporary Food Establishment/One Day Event

APPLICATION MUST BE FILLED OUT COMPLETELY FOR CONSIDERATION

Date Application Completed: _____

Name of Event: _____

Date(s) of Event: _____

Time(s) that Event will be held approximately from: _____

Location/Address of Event: _____

Name of Vendor who wants to serve/sell food: _____

Food Vendors Address: _____

Food Vendors Telephone #: _____

Food Vendors Email Address: _____

Name of Organization Sponsoring Event: _____

Coordinator of Event: _____

Organization Address: _____

Organization Telephone #: _____ Contact Person Telephone No: _____

E-mail Address: _____

1. No food items are allowed to be prepared from someone's residence. All food items are to be prepared either at the location of event (provided that there is equipment available there to adequately prepare food) or at a commissary base of operations which is inspected by that establishment's jurisdiction's health department. If commissary is outside of Plainfield, NJ, then coordinator must provide health department with a copy of commissary's most recent health inspection written report.

2. List food & beverage menu items to be served at event. Also, for all food which require preparation, list if it will be prepared onsite or at commissary

3. Is there a Public Bathroom for patrons and food handlers to use at event? If so, where?

YES _____ NO _____

Bathroom is located _____

4. List the methods/equipment that will be located at the event to maintain potentially hazardous foods at proper temperatures:

5. If any foods are being transported from commissary to event, describe how potentially hazardous hot and cold foods will be transported to the event in a manner to keep them at proper holding temperatures:

6. Please list where trash accumulated from the event will be disposed of:

7. How will potentially hazardous food temperatures be monitored at the event?

8. How and where will foodworkers be able to wash their hands and/or avoid touching ready-to-eat foods with their bare hands?

9. Describe where utensil washing will take place. Describe the procedures you will use to wash, sanitize, and air dry equipment, utensils, and other food preparation surfaces. Also list what type of sanitizer you will use for sanitizing

10. Describe how and where used wastewater from utensil cleaning and handwashing will be collected, stored and disposed of.

Signature of Applicant

Date

Printed Name of Applicant

| | | |
|-----------------------------|--------------|-------------------|
| FOR OFFICE USE ONLY: | | |
| Payment Type: | Check: _____ | Money Order _____ |
| Amount: \$ | _____ | |
| Initials: _____ | Date: _____ | |