



COUNTY OF COLUSA
COMMUNITY DEVELOPMENT DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
 146 7th Street, Colusa, CA 95932
 (530)458-0395

**APPLICATION FOR A COLUSA COUNTY
 TEMPORARY FOOD FACILITY (TFF) PERMIT**

The completed application must be submitted to this office at least 14 days before an event. If applications are submitted within five days of the scheduled event date, a delay in permit approval may occur.

Name of Food Facility _____ Name of Event _____ Location of Event _____

Mailing Address _____ Name of Contact Person _____

Phone Number _____ Fax Number _____ Event Coordinator _____

Name of Kitchen Facility being used: _____

Please list all food and beverage to be served including all condiments or toppings:

List all food/beverage items	Food/Bev source	Transport Container	Cooking Procedures (Deep Fry, Grill, BBQ)	Cold/Hot Holding

Describe:
Number, location and setup of hand washing facilities to be used by the TFF workers _____

The location and setup of utensil washing _____

Cold and hot holding equipment _____

The source of potable water supply and describe how water will be stored and distributed _____

Where wastewater from hand washing /utensil washing will be collected, stored and disposed _____

The location and status of the nearest employee restrooms and the janitorial area _____

The floors, walls, and ceiling surfaces and lighting within the TFF/Food Booth _____

If the event is 2 or more days, where will food be stored _____

****** NO HOME FOOD PREPARATION OR STORAGE IS ALLOWED ******

The following facilities/equipment will be provided as required and described in the Colusa County Environmental Health Department Temporary Food Facility Requirements: **Check all that apply.**

- | | | |
|---|--|---|
| <input type="checkbox"/> Approved Food Dispensers(s) | <input type="checkbox"/> Sanitizing solution and test strips | <input type="checkbox"/> Toilets w/ Handwash Facility |
| <input type="checkbox"/> Hot & Cold Food Holding Units | <input type="checkbox"/> Hand washing Facility w/ warm (100°F) water | <input type="checkbox"/> Garbage Container |
| <input type="checkbox"/> Metal Food Probe Thermometer (0°-220°) | <input type="checkbox"/> Potable Water | <input type="checkbox"/> Utensil Sinks w/hot water |
| <input type="checkbox"/> Disposable Food Service Gloves | <input type="checkbox"/> Fully Screened Fly Proof Booth | <input type="checkbox"/> Overhead Cover |
| <input type="checkbox"/> Sanitary Commercial Cutting Boards | <input type="checkbox"/> Floor Covering Material | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Utensil Washing Dishpans | <input type="checkbox"/> Liquid Waste Containers | <input type="checkbox"/> Other: _____ |

Please add any additional information about your TFF/Food Booth that should be considered (e.g. non-commercial equipment to be used, etc.) on the back of this page. Additionally, please complete the table on the previous page – list all food and beverage items (including ice) to be prepared and served. Attach a separate sheet if necessary. (Note: Any changes to the menu must be submitted to and approved by this office at least 10 days prior to the event).

****For complete food facility requirements, refer to the text of the California Retail food Code (CalCode).****

I have read and understand the attached information and will comply with the requirements of CalCode.

Applicant Signature

Date

Approved by REHS

Date

____ FOR OFFICE USE ONLY ____

- Pre-Packaged Foods
- High Risk/Potentially Hazardous Foods
- Approved Colusa County Fixed Food Facility (with Food Facility + Caterer Permit)
- Colusa County Caterer (with permit)
- Non-Profit or Veteran's Exemption (Documentation Required)