



GRAYS HARBOR COUNTY
DEPARTMENT OF PUBLIC SERVICES
ENVIRONMENTAL HEALTH DIVISION

100 W Broadway, Suite 31
Montesano, WA 98563
360-249-4222 Phone
360-249-3203 Fax

2023 Single Event Temporary Food Establishment Permit Application

All portions of this application must be completed, legible, signed, and submitted **with full payment**, to the Environmental Health Division **at least 8 days prior the public event's start date**

PERMIT FEE SCHEDULE – Effective January 1, 2023

Add a ✓ to a box below indicating the type of permit you are applying for

RESTRICTED	\$55 per event		
TCS FOODS	1 – 3 Days	\$90	
	4 – 8 Days	\$140	
	9 – 21 Days	\$210	
	More than 21 days but less than 3 days per week	\$220	
Non-profit or charitable organization	50% pro-rated permit fee		
LATE FEES APPLY <i>If received 7 or less calendar days prior to the event</i>	50% of the permit fee		

Business/Organization Name: _____

Primary Contact: _____ Phone: _____

Mailing Address: _____

City/State/Zip: _____

Email: _____

Is your Organization a Registered Non-Profit? Yes, provide 501(c)(3) tax code: _____ No

Using a Mobile Food Unit (Food Truck)? Yes No

If yes, you **MUST** provide the L&I Permit Number: _____

Event Information

Name of Event: _____

Event Location/Address: _____

Dates of Operation: _____ Times of Operation: _____

Event Coordinator Name: _____ Phone: _____

Please complete the following with as much detail as possible. Answers to the following will be used to determine if your food handling techniques are consistent with proper food safety. If you need to include an additional sheet of paper, please do so. *FOODS PREPARED AT HOME CANNOT BE SERVED TO THE PUBLIC*

Commissary

Organizations or individuals requiring the use of an off-site kitchen facility must be reviewed and approved by this office.

1. Does your operation require advance menu preparation such as cooling or uses produce that is not purchased pre-washed/pre-cut? Yes N/A (if N/A, move to Food Handling at the Event below)
 - If yes, you **must** obtain permission to use a kitchen facility licensed in Washington State and provide the following information:

Name of Approved Facility: _____

Address of Approved Facility (street/city/state/zip): _____

Date(s) of Food Preparation: _____ Time(s) of Food Preparation: _____

2. Describe activities at the approved kitchen facility listed above:

Cooking
Cooling
Produce Washing (example → lettuce and tomatoes washed and cut)
Dishwashing
Storage
Other

Signature of Kitchen Owner/Operator: _____ **Date:** _____

Kitchen Owner Name: _____ **Phone Number:** _____

Food Handling at the Event

1. **Water Supply source/location:** _____

2. **Wastewater Disposal location:** _____

THE STORM DRAIN IS NOT A SANITARY SEWER

3. **Garbage Disposal:** Provided by Event Coordinator Dumpster located on-site
 Will haul away
4. **Restroom location equipped with hot and cold running water, soap, and paper towels:**
 Within 200 feet of booth Inside event facility Other, explain:
5. **Handwashing station**
 Plumbed hand sink Portable handwash area with warm water (refer to the *Guidelines for Temporary Food Establishments* document for example)
6. **Dishwashing**
 Three-compartment sink in an approved kitchen (complete the Commissary section)
 Portable 3 tubs to wash, rinse and sanitize
 Will provide extra utensils, no equipment washing required for operation
7. **Sanitizer/Bleach**
 You will provide a container, wiping cloths, and test strips (1 teaspoon bleach to 1 gallon water):
 Yes No
8. **Produce Washing**
 Produce purchased pre-washed and pre-cut
 Produce washed and processed in an approved kitchen (complete the Commissary section)
 Separate gravity flow container on-site for produce washing only
9. **Method of overhead protection over entire food preparation service area:**
10. **Barrier(s) used to prevent barehand contact with ready-to-eat food:**
11. **Cooking Equipment:** Grill/BBQ Oven Fryer Smoker
 Other:
12. **Cold/Hot Holding Equipment:** Refrigerator Ice chest Steam table Grill/BBQ
 Other:
13. **Will you have at least one food worker that possesses a valid Washington State Food Worker Card?** Yes No

Washington State ISSUED Food Worker's Card: List all those cardholders who shall be assigned as the Person-In-Charge (PIC) during the event.

Printed Name of All PIC Workers	Food Worker Card Expiration Date

There must always be at least one person on-site with a WA Food Worker's Card

HANDLING PROCESS FOR FOOD AND BEVERAGE MENU ITEMS
LIST ALL MENU ITEMS, INCLUDING INGREDIENTS FOR EACH FOOD & SOURCE OF FOODS


List All Food & Beverage MENU Items (Example: tacos, deli wraps, store-bought potato salad, etc.)	Is the Food Item Purchased Pre-Cooked or Raw?	Are Any Food Items for This Menu Item Prepared at a commissary ?	How Will Food be Transported to the Event?	How Will Each Listed Menu Item Be Cooked? (i.e., reheating, grilling, frying, etc.)	Cooking Temperature	How Will Food Be Hot or Cold Held? (Hot 135° F or above Cold 41° F or less)
Example: Beef Hot Dog on a Bun with Condiments	Purchased Pre-Cooked	No.	Ice Chest / Cooler	Heat Hot Dogs on Grill Per Each Order. Hot Dog Will be Assembled with Disposable Gloves and/or Tongs.	140°	Ice Chest with Ice Fully Surrounding Foods Will be Used to Cold Hold.

List all Food & Beverage MENU Items (Example: tacos, deli wraps, store-bought potato salad, etc.)	Is the Food Item Purchased Pre-Cooked or Raw?	Are Any Food Items for This Menu Item Prepared at a commissary ?	How Will Food be Transported to the Event?	How Will On-Site Food Preparation for Each Listed Menu Item Be Cooked? (i.e., reheating, grilling, frying, etc.)	Cooking Temperature	How Will Food Be Hot or Cold Held? (Hot 135° F or above Cold 41° F or less)
Example: Fully Cooked Cheeseburger with Condiments and Toppings	Purchased Raw	Yes, See Commissary Section.	Ice Chest / Cooler	Cooked on Grill Per Order.	158°	Ice Chest with Ice Fully Surrounding Foods.

Only Food Items Listed Above and Approved by this Office May be Served. Submittal of Additional Items and Approval by this Office is Required Seven (7) Days Before the Event. Additional Fees May Apply

Site Plan

Using the grid below, draw your set up for your temporary food service operation. Be sure to include all cooking (BBQ, fryer, etc.), hot holding (BBQ, steam tables, etc.), and cold holding equipment (refrigerators, ice chests, etc.). Your site plan must also show where your designated handwashing station is located as well as your food preparation areas and dishwashing set up (if applicable).

																					
																				North Arrow	
																				Scale:	

I HAVE READ AND AGREE TO COMPLY WITH THE REQUIREMENTS FOR A TEMPORARY FOOD SERVICE ESTABLISHMENT. I UNDERSTAND THAT IF I DO NOT COMPLY WITH THE ABOVE STATED REQUIREMENTS MY ESTABLISHMENT WILL BE CLOSED.

OPERATOR SIGNATURE: _____ **DATE:** _____

REGULATORY AUTHORITY SIGNATURE: _____ **DATE:** _____

*Any revision to plans of operation must be submitted to the Environmental Health Division in writing for review and approval. Please be aware that revisions may delay the issuance of a permit. A Temporary Food Service Establishment found operating without an approved Temporary Food Service Permit issued by Grays Harbor County will be charged **double** the original permit fee. Payable prior to resuming operation or to be applied to the cost of the next permit fee.*