

License

Ten days before the event the food vendor shall make application for a license; Include floor plan, equipment, menu, and handling procedures with the Cuyahoga County Board of Health, CCBH.

The license fee is \$40.00 / day and \$ 20.00 / day for non-profit operations. Temporary Food licenses are issued for a maximum of five days. The sanitarian will deliver the license/permit on the first day in conjunction with the inspection.

Operators selling foods that are non-potentially hazardous such as; whole fresh fruits and vegetables, commercially pre-packaged foods, commercial beverages, and cottage foods are exempt from licensing.

Food

Food must be from an approved source. Food not prepared at the temporary food operation shall be prepared in a licensed facility and transported to the temporary site by a method approved by CCBH. Foods shall not be prepared at home. Exceptions are cottage foods and home bakeries.

Food Protection

- A. All potentially hazardous foods shall be maintained at 41 F or below and 135 F or above. Mechanical refrigeration shall be used for overnight storage of potentially hazardous foods.
- B Frozen foods are to be thawed utilizing acceptable methods.
- C. Foods must be protected. Covers or an approved type food shield for open or exposed food display must be provided.
- D. Food and food containers shall be stored a minimum of 6 inches above the floor or ground.
- E. Utensils, gloves for the transfer, preparing and/or serving of foods shall be provided.
- F. Provide and use a probe thermometer to verify cooking and holding temperatures.

Equipment, Utensils and Supplies

Depending on the type of foods, methods of transport, preparation and hot-cold holding all or some of these items are needed.

Hand washing Facilities. Method will be approved by the CCBH based on food type and preparation.

Three compartment sink or equivalent (three bucket system).

Sanitizer with test strips. chlorine (bleach 5.25% concentration), quaternary ammonium, or iodine.

Probe thermometer(s), if handling potentially hazardous foods.

Cold and hot holding equipment; coolers, grills, etc.

Utensils, disposable gloves.

Structural Requirements

If determined by the CCBH that floor, walls or ceilings are necessary, the materials used must be smooth, impermeable and easy to clean.

Support Facilities

Water is to be provided from an approved source only.

Adequate sewage-waste water disposal site(s).

Portable toilet facilities, hand sinks, and garbage/refuse disposal are required.

Application for a License to Conduct a Temporary: (check only one)

Instructions:

1. Complete the applicable section. (Make any corrections if necessary.)
2. Sign and date the application.
3. Make a check or money order payable to:
4. Return check and signed application **to:**

- Food Service Operation
 Retail Food Establishment

**Cuyahoga County Board of Health
 Environmental Health
 5550 Venture Drive
 Parma, OH 44130**

Before license application can be processed the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in not issuing a license. This action is governed by Chapter 3717 of the Ohio Revised Code.

| | | |
|----------------------------------|----------|-------------------|
| Name of temporary food facility | | |
| Location of event | | |
| Address of event | | |
| City | | State ZIP |
| Start date | End date | Operation time(s) |
| Name of license holder | | Phone number |
| Address of license holder | | |
| City | | State ZIP |
| List all foods being served/sold | | |
| _____ | | |
| _____ | | |

I hereby certify that I am the license holder, or the authorized representative, of the temporary food service operation or temporary retail food establishment indicated above:

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

Licensors to complete below

| | |
|---------------|--------------|
| Valid date(s) | License fee: |
|---------------|--------------|

Application approved for license as required by Chapter 3717 of the Ohio Revised Code.

| | |
|-----------|-------------|
| By | Date |
| Audit no. | License no. |

Temporary Food Service Information

Cuyahoga County Board of Health

Name: _____ Event Location : _____ Date: _____

If food is prepared in advance, how will it be transported to the event and where was it prepared:

How will foods be held hot: (above 135 F)

How will foods be held cold: (Below 41 F)

What type of hand washing facility will be used by employees:

How will food on display be protected from contamination:

How will equipment be cleaned and sanitized:

Below make a detailed drawing of your floor plan.

Show all equipment and utensils, support facilities and serving areas.

