



Environmental Health Services

13307 Miami Lane, Caldwell, ID 83607
Phone: 208.455.5400 Fax: 208.455.5405

Application to Provide Food Services as a Food Vendor During a Temporary Event

Temporary Food Establishment:

A food establishment that operates for a period of no more than 14 consecutive days in conjunction with a single event or celebration.

Permit Fee: 1-Day Event: \$35.00 / 2 or 3 Day Event: \$45.00 / 4 Days+/Multiple Events: \$72.00

Intermittent Food Establishment:

A food vendor that operates for a period of time, not to exceed three days per week, at a single specific location in conjunction with a recurring event, and that offers temperature control for safety foods.

Permit Fee: \$72.00

Licensure Requirements:

According to the Idaho Food Code 8-302.11, an application must be submitted 30 calendar days prior to the planned day of opening. Southwest District Health (SWDH) will do all it can do to process this application if submitted in less than 30 days prior to the event. **If the application is submitted less than seven (7) days prior to the event, the submitted application may not be approved and potentially hazardous foods cannot be served. A SWDH Environmental Health Specialist will contact you in one (1) business day if submitted less than seven (7) days prior to the planned event to grant approval to operate.**

One fee will cover the multiple event or intermittent food license for a calendar year if:

- * The same menu is served at each event.
- * Proof that a food license has been paid for at another district (copy of receipt or permit).
- * Proof that the same menu is being served at the planned event.

A copy of the food license with menu is required to be posted in the booth at each event.

If a vendor plans to operate in multiple health districts, the vendor must obtain a food license for that event from the local health department. If the same menu is served, no additional fee will be required.

❖ **Fraternal, benevolent, and not-for-profit organizations are exempt from licensure if providing food for one day at any event or celebration during a calendar week.**

❖ **Vendors that are selling non-potentially hazardous foods such as factory sealed and prepackaged foods are exempt from licensure. An application is still required, and once reviewed the Environmental Health Specialist will determine if the products meet the above criteria.**

The person responsible for the food booth must re-apply for each event not listed on this application. An additional event application must be submitted seven days prior to the next planned event.

Your food booth may not be inspected at each event, but SWDH may still inspect at any time the establishment is operating.

Some instances may include

- Previous violations noted on past site visits.
- Operating at multiple day events.
- Setting up a booth that is operating in different seasons (temperature changes).

Incomplete Applications Will Not Be Processed



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Application for Temporary/Intermittent Food License

- A non-refundable application fee (payable to SWDH) is required at time of submittal.
- Application must be submitted seven days prior to the planned event.

ABOUT YOUR BOOTH AND BUSINESS

Name on booth sign: _____

Date and time booth will first be set up: _____

Date(s) the booth will operate: _____

Time the booth will operate: _____

Business address: _____

Business phone: _____ Business fax: _____ E-mail: _____

CONTACT INFORMATION REGARDING THE APPLICATION

Name of booth operator: _____

Home address: _____

Home phone: _____ Home fax: _____ E-mail: _____

ABOUT THE TEMPORARY EVENT

Temporary event name: _____

Dates from: _____ Through: _____

Location of temporary event: _____

Organizer of the temporary event: _____

Event organizer phone number: _____ Cell phone: _____

Time/date booths are allowed to set-up: _____

CONTACT INFORMATION DURING THE EVENT

Name of booth contact #1: _____

Name of booth contact #2: _____

FOOD INSPECTION INFORMATION ★Please attach a copy of the most recent inspection.

Agency that inspects your business: _____

Date of most recent inspection: _____

PREPARATION and SET-UP

Will any menu items be prepared prior to the start of the event?

Yes No

If yes, where will the food be prepared? _____

All foods prepared prior to the event are required to be made at a licensed food establishment. A signed commissary agreement (attached) is required for approval of this application (Idaho Food Code 3-201.11).

Provide the type of equipment to be used:		
Cold holding of food? _____		
Hot holding of food? _____		
Cooking of food? _____		
Foods prepared in a temporary type food booth cannot be cooled and re-served		
Hand wash facilities	<input type="checkbox"/> Plumbed sink	<input type="checkbox"/> Gravity flow
Utensil washing facility		
<input type="checkbox"/> compartment sink		<input type="checkbox"/> container sanitizer set-up
Water source	<input type="checkbox"/> Public water	<input type="checkbox"/> Private well
A private well will require the water to be tested for nitrate and bacteria before the planned event.		

Inside the box below, please show all equipment you will be using at the event, and the location of all equipment. This diagram should represent what the Environmental Health Specialist will see during the on-site visit.



I agree to comply with all State and District rules and regulations, and will permit access to the establishment at all reasonable times to representatives of SWDH for the purpose of inspection. In the event of my failure to comply with any of the terms herein set forth, I further agree that my permit shall be revoked or suspended.

Signature of Responsible Person	Date
<p align="center">For Office Use Only</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Intermittent <input type="checkbox"/> Temporary <input type="checkbox"/></p>	<p>Promoting and Protecting your health in Adams, Canyon, Gem, Owyhee, Payette, and Washington Counties.</p> <p align="center">Environmental Health Office Locations</p> <p>Caldwell: 13307 Miami Lane Phone: 455.5400/Fax: 455.5405</p> <p>Emmett: 1008 Locust Street Phone: 365.6371/ Fax:365.4729</p> <p>Payette: 1153 3rd Ave North Phone 642.9321/Fax: 642.5098</p>

MENU AND FOOD SOURCE

Any menu change shall result in the need to purchase a new food license.

Menu Source

(May be restricted)

Source of Food Product

(Store name)

Packaged products to be sold:

This is the planned menu for this event. Any changes must be approved seven (7) days prior to operating. A menu change shall result in the need to purchase a new food license.

Signature of Responsible Person

Date

Event Listing

Event name: _____	Set up time: _____
Event location: _____	
Event coordinator: _____	Phone #: _____
Open date: _____	Close date: _____
Event name: _____	Set up time: _____
Event location: _____	
Event coordinator: _____	Phone #: _____
Open date: _____	Close date: _____
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