

HHSA Public Health | Environmental Health Services WWW.TULARECOUNTYEH.ORG • (559) 624-7400

Catering Application

This document will help you prepare the required written description of your proposed catering activities and the equipment and standard operating procedures that you propose to use for your catering operation. Caterers may operate at contracted private events, permitted community events, or at a permitted host facility. A signed and APPROVED copy of this document must be maintained with your catering operation during all operating hours.

A non-refundable review fee of \$122.00 will be charged at the time of submittal for all Catering applications.

Please note that any changes to the menu, equipment, or procedures listed on your approved form will require another review and written approval by Environmental Health.

Catering Operation Name:		
Business OwnerName:	Phone #:	
Email:	Fax #:	
Mailing Address:	City:	Zip Code:

	Documents to Include				
~	Check the following items as you include them with this document.				
	Complete and submit an application. Ensure that all information is legible.				
	Kitchen Agreement- The Caterer must prepare and store all food and equipment at kitchen (permitted food facility). The Caterer and the proposed kitchen must complete and sign a kitchen agreement form. Caterers operating at host facilities are subject to limited food preparation only (HSC 113818).				
	Menu- List all food and beverage items to be served or sold. (On page 2)				
	Food Protection Manager Certification- Provide proof that an owner or employee has an ANSI certified Food Safety Managers certificate.				
	Food Handler Card- Provide documentation that all other employees have an ANSI approved food handler card.				
	Sample Log- A written log must be maintained for a minimum of 90 days after each operation to include the event name and contact information, location of service date, time, menu of food and beverages served.				

	(FOR OFF	FICE USE ONLY)	
Amount Paid:	FA:		<u>PR:</u>
Receipt #:		Received By:	

Food Production

1. Indicate the location where you will store food and equipment at the end of the day.

Approved Kitchen Name: _____

Permit #: _____

Address:

MENU DESCRIPTION (USE ADDITIONAL SHEET ON PAGE 5, IF NECESSARY)					
Indicate all the food and beverage items for sale. WHERE WILL THE FOOD BE PREPAR					
FOOD ITEM	COMMISSARY ON-SITE				

2. List equipment and utensils that will be used. Please be specific on equipment's use and function. For example: *Equipment: Blender* Intended use: Make Smoothies

Equipment: Crock Pot Intended use: keep food hot 135° Fahrenheit

Equipment	Intended use during food preparation or catering event

Food Protection, Transportation, & Operation Setup

3. Food Transport and Storage- Describe the procedures for transportation (more than 30 minutes) and storage of food and equipment. Include methods to cold-hold and hot-hold potentially hazardous foods and the methods to hold food until service (e.g., covered chafing dishes, etc.). Include information about the proposed catering operation booth enclosure and hand sink. Please note that all potential hazardous foods not held at 41°F or below during operation shall be discarded at the end of service.

Food Protection During Transport	Describe how food will be transported in vehicle. (ie. Cambro, i	ce chest)
Hot Holding Method	During Transport-	
(135°F and above)	At Event-	
Cold Holding Method	During Transport-	<u>_</u>
(41°F and below)	At Event-	, , , , , , , , , , , , , , , , , , ,
Utensil Distantian and	During Transport-	
Protection and Storage	At Event-	
Catering Operation Booth	All catering operations require proper flooring (concrete, tarp, or seal Catering operations set up outside and handling open food and bever with service windows no larger than 216 square inches in size, and at	ages may require full screen enclosure
Enclosure	Floor: Walls:	Ceiling:
Catering Operation Hand Wash	I will provide a handwash station with a five (5) gallon container with warm water at 100 degrees F pump soap, paper towels, catch bucket on the ground, Trash can for towel waste. Initial:	S Gallon Thermal Some Spigot Toreal ash Bin Soap

Cleaning and Sanitizing

4. Cleaning- Describe the procedures you will use to clean and sanitize food contact surfaces, equipment, and utensils at the approved kitchen. (Hint: clean and sanitize utensils every four (4) hours) if participating at community food events.

Indicate the specific sanitizer that you will use by checking the box below:

Contact with a solution of 100 ppm (parts per million) available chlorine for at least 30 seconds.

Contact with a solution of 200 ppm available quaternary ammonium for at least one minute.

Statements					
Initial next to	Initial next to the below statements indicating that you understand and will abide by them.				
1	The review and approval of this Catering Operation Standard Operating Procedure and health permit for a Caterer must be completed and paid for prior to operating.				
2	A Catering Operation Permit may be used to prepare and serve food at private events, community events, farmer's markets, and permitted Host Facilities only. Make sure to get prior approval from event organizer to participate at community events. <u>Catering at swapmeets is not allowed.</u>				
3	Operating at a host facility is limited to a four (4) hour duration in any one twelve (12) hour period. Upon request, you must provide your operation schedule to Environmental Health for review.				
4	All food must be stored and prepared at the approved commissary. Home preparation of food for a catering operation is prohibited.				
5	The following food processes can only be done in the permitted kitchen and are <u>not allowed</u> at an offsite catering operation. Slicing and chopping unless it is on a heated cooking surface, thawing, cooling of cooked perishable foods, grinding raw ingredients or grinding perishable foods, reheating of perishable foods for hot holding except for steamed or boiled hot dogs and tamales in the original, inedible wrapper.				
6	A temporary handwash station shall be provided at the offsite catering operation with a 5 gallon container with 100 ° F warm water, a spigot, soap, paper towels, and catch bucket for waste water. Self-contained portable sinks and plumbed sinks are also allowed.				
7	Handwashing must be done after: using the restroom, sneezing or coughing, handling raw food, smoking, eating or drinking, touching face or hair, handling garbage. Handwashing must always take place before putting on gloves, and before handling any foods or beverages.				
8	Employees shall not prepare or serve food if they are not in good health or have a nasal discharge, gastrointestinal issues, or are diagnosed with a communicable disease that is transmissible through food.				
9	When operating at an off-site food catering operation, a sign must be posted at the event premises with the Catering Operation's name, city, state, zip and name of owner.				

10	Will keep all food protected from contamination. Will provide an adequate supply of utensils for individual use. Will not allow a community dipping container. Will provide new plates and utensils for returning to self-service display. Replace utensils as needed. Keep utensil handles out of food, on a clean surface or in a clean container.
11	At the end of the operational period, all multi-use utensils will be washed and sanitized at the approved kitchen.
12	All Potentially Hazardous Foods that were used in food service shall be discarded at the end of the operation, unless they were kept covered, protected, and held at the proper temperatures
13	Have access to potable water or bring an adequate supply of potable water.
14	All garbage, refuse and liquid waste will be disposed of in an approved manner.
15	All equipment, utensils and food related items shall not be stored in a private home.
16	Any food that has become contaminated, suspected of becoming contaminated or presumed unsafe must be discarded.
17	An approved toilet and handwashing facility will be available within 200 feet of the offsite food service operation.

Acknowledgment

I understand and agree that if I make changes to my operating procedures, I will immediately notify Environmental Health. Revised operating procedures may be provided by fax, E-mail: <u>tularecountyehevents@tularehhsa.org</u>, and in person. Failure to notify Environmental Health of any changes may result in a Notice of Violation, suspension, fees, or revocation of the health permit. Any valid complaint will result in an enforcement fee charged at the current fiscal year rate. I will ensure that all approvals are obtained from endorship accention for a prior for a final perior of the health permit. from all applicable agencies prior to operation (e.g., fire, zoning, etc.). By signing I certify that all information is true and correct.

Authorized Signature:

Print Name:_____ Title: _____

Date:



COMMISSARY / APPROVED KITCHEN VERIFICATION. MOBILE FOOD FACILITY (MFF) / CATERER

FA# PR#

COMISARIA / VERIFICACIÓN DE COCINA APROBADA

MÓVIL DE ALIMENTOS (MFF) / SERVICIO DE SERVICIOS DE ATENCIÓN

MFF / CATERER BUSINESS INFORMATION INFORMACIÓN DEL NEGOCIO DE MFF / CATERER

Business Name: Nombre de el negocio						
License Plate Number (if applicable): <i>Número de placa (si corresponde)</i>						
Owner Name:			-			
Owner Mailing Address: Dirección postal del dueño		City:	I		Zip Code:	
Phone Number (Home/cell): Número de teléfono (casa/ celular)						
Email Address: dirección de correo electrónico						
I, the above-mentioned MFF / Caterer Owner will operate out of the below noted below) (Calcode Sec. 114297). I will store the vehicle (if applicabl Environmental Health Division at (559) 624-7400 to make the necessary or reportaré a la comisaria al menos una vez cada día de operacion para la en el comisario u otro lugar aprobado. Si se descontinúa el uso de la com	e) at the changes. <i>limpieze</i>	comissary or another approved la Yo, el Propietario mencionado e a y el servicio (como se indica a c	ocation. If the use conteriormente, oper conteriormente, oper continuación) (Calco	of the con caré desde ode Sec.	nmissary is discontinued, I e la comisaria mencionado 114297). Guardaré el vehío	will notify the a debajo y me culo (si corresponde)
Signature of MFF/Caterer Owner Fi	rma a	lel propietario de MFF/	catering		Date Fecha	
COMMISSARY/ APPROVED KITCHE INFORMACIÓN SOBRE LA INSTALACIÓN DE Type of Facility: Commissary Business Name: Nombre del Negocio Qwner's Name:	COC Con	INA APROBADA/COM	IISARIO Other:			
Nombre del dueño		City:			Zip Code:	
Dirección — — — — — — — — — — — — — — — — — — —		(Mului M	lobile:		Courgo posiai	
Número de teléfono: (Empresa) Preparation or packaging of food Preparación o envasado de alimentos. Electrical hook-up & service of vehicle Conexión eléctrica y servicio del vehículo. Toilet & handwashing Aseo y lavado de manos Waste tank/ sewage disposal facilities Depósito de residuos/instalaciones de eliminación de aguas residuald I, the Commissary Owner, can and will provide the necessary f Yo, el dueño del comisario, puedo proporcionar y proporcionare anteriormente en mi instalación autorizada:	facilitie	U U	equipment secos ssa nentioned MFF/		* 1 *	onâmiento ñocturno food storage ss refrigerados/congelados s s alimenticios ty:
Signature of Commissary/Approved Kitchen Manage	er <i>Fir</i>	rma del Comisario/Gere	nte de Cocinc	a Apro	bado Date	Fecha
NOTE: The signature of Commissary/Faci NOTA: La firma del Comisario/dueño de la instalación NOTE: Use of an unapproved facility NOTA: El uso de una instalación no aprobada para cua	<i>debe s</i> for an	er un original dentro de los 3 y of above purposes can lea) <i>días posteriores</i> d to revocation o	s <i>a la so</i> of your	<i>licitud del permiso. SIN</i> permit to operate.	
This section shall be completed and approved by the Esta sección deberá ser completada y aprobada por	: local la Age	Environmental Health ncia de Salud Ambiental local	Agency wher donde se encuen	e the a tra el co	bove commissary	is located.
		Employee #:				□ Disapproved
		nmental Health Services ney Blvd. Visalia, CA 93277				



CATERING LOG SHEET

DATE	NAME OF HOST FACILITY OR EVENT	TIME OF FOOD SERVICE START / END	MENU	FOOD TEMP LEAVING	FOOD TEMP ARRIVING	IF A CATERED PARTY CUSTOMER NAME, ADDRESS & PHONE
2/19/2022	Mary's Wedding	11:00am-2:30pm	Cheeseburgers, French fries	38F	41F	Mary Customerson 123 House Ave, Food City 555-555-5555