



Application for Temporary Food Establishment Permit

Director
202-513-7217

Assistant Director
202-513-7226

National Capital
202-619-7070

North Atlantic
978-970-5033

Southeast
404-562-3124
x696, x697

Midwest
402-221-3486

InterMountain
303-969-2921
303-969-2922

Desert Southwest
505-988-6040

Pacific West/Pacific
Islands/Alaska
510-817-1375
206-220-4270

Directions:

The operator of **each** TFE Site must complete this application. The application must be completed and submitted to the NPS Representative (subject to Public Health Program (PHP) review) at least 30 days before an event.

In addition, using the attached Sketch Sheets, each operator must provide:

- a drawing of their temporary food establishment; (**Sketch Sheet 1**)
- a drawing of the **entire event area** depicting their TFE site in relation to the potable water supply, electrical sources, the waste water disposal area, lavatories, etc., as well as all food preparation and service areas at the Event. (**Sketch Sheet 2**)

Date of Submission

Name of Temporary Food Establishment:

Name of Operator/Owner:

Mailing Address:

Telephone Number:

Name of Event:

Date(s) and Time(s) of Event:

Date and Time TFE will be set up and ready for inspection:

1. List **all** food and beverage items to be prepared and served. Attach a separate sheet if necessary. (NOTE: Any changes to the menu must be submitted to and approved by the NPS Representative (subject to PHP review) at least **10 days** prior to the event.)

2. Will All Foods Be Prepared At The TFE Site?

_____ **Yes**>>Complete **Attachment A**

_____ **No** >>Complete **Attachments A & B**

If No, the operator **Must** provide a copy of the current license for the permanent food establishment where the food will be prepared.

Web Resources

NPS Public Health:

http://www.nps.gov/public_health/intra/

CDC:

<http://www.cdc.gov>
Hotline: 888-246-2675

State and Local Health Departments:

<http://www.cdc.gov/mmwr/international/relres.html>

3. Describe (be specific) how frozen, cold, and hot foods will be transported to the Temporary Food Establishment:

a) How will food temperatures be monitored and maintained during the event?

4. Identify the sources for each meat, poultry, seafood, and shellfish item. Include the source of the ice:

5. Using **Attachment C**, record the names, phone numbers, shifts to be worked during the event and the assigned duties of all Temporary Food Establishment workers (paid and volunteer).

6. Describe the number, location and set up of handwashing facilities to be used by the Temporary Food Establishment workers:

7. Identify the source of the potable water supply and describe how water will be stored and distributed at the Temporary Food Event. If a non-public water supply is to be used, provide the results of the most recent water tests.

8. Describe where utensil washing will take place. If no facilities are available on site, describe the location of back-up utensil storage.

9. a) Describe how and where wastewater from handwashing and utensil washing will be collected, stored and disposed:

b) If portable toilets are to be used, identify the frequency of waste removal:

10. Describe the number, location and types of garbage disposal containers at the Temporary Food Establishment as well as at the event site:

11. Describe the floors, walls and ceiling surfaces, and lighting within the Temporary Food Establishment:

12. Describe how electricity will be provided to the Temporary Food Establishment:

13. Please add any additional information about your Temporary Food Establishment that should be considered:

Statement: I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior permission from the NPS Representative or NPS Public Health Program may nullify final approval.

Signature(s)

Date: _____

Approval of these plans and specifications by the NPS Representative or NPS Public Health Program does **not** indicate compliance with any other code, law or regulation that may be required (i.e., federal, state, or local). Furthermore, it does not constitute endorsement or acceptance of the completed establishment (structure or equipment). A preopening inspection of the establishment with equipment in place and operational will be necessary to determine if it complies with the local and state laws governing food service establishments.

NPS Representative:

APPROVAL: _____ DATE: _____

Permit Restrictions:

Permit Effective Dates:

DISAPPROVAL: _____ DATE: _____

Reason(s) for Disapproval:

Reviewer Signature & Title

Date: _____

Sketch Sheet 1

Drawing of Temporary Food Establishment

In the following space, provide a drawing of the Temporary Food Establishment. Identify and describe all equipment including cooking and cold holding equipment, handwashing facilities, work tables, dishwashing facilities, food and single service storage, garbage containers, and customer service areas.

Sketch Sheet 2

Drawing of Event Area

In the following space, provide a drawing of the entire Temporary Event Area including locations of the toilet facilities, garbage facilities, common use dishwashing facilities, the potable water supply, electrical sources, the waste water disposal area, and all food preparation and service areas on the grounds/site of the Temporary Food Event.

Food Preparation at the Temporary Food Establishment

Attachment A

Food	Thaw How? Where?	Cut/Wash Assemble Where?	Cold Holding How? Where?	Cook How? Where?	Hot Holding How? Where?	Reheating How?	Commercial Pre-Portioned Package

Food Preparation at the Licensed Permanent Food Establishment

Attachment B

Food	Thaw How? Where?	Cut/Wash Assemble Where?	Cold Holding How? Where?	Cook How? Where?	Hot Holding How? Where?	Reheating How?	Commercial Pre-Portioned Package

Employee Log

Attachment C

Name	Date	Assignment	Time In	Time Out