

TEMPORARY FOOD SERVICE EVENT ORGANIZER APPLICATION

Jefferson County Department of Health 1400 6th Ave South Birmingham, AL 35233 Office (205) 930-1260 Fax (205) 939-3019 temporaryevents@jcdh.org

1. Name of Event		
2. Address of Event		
3. Event Dates and Time	e(s)	
4. Organizer Name		Organizer Phone
5. Organizer Address		
6. Organizer Email		
7. Onsite Coordinator's N (if different from Organia	lame and Phone Number zer)	
8. Number of Anticipated	f Food Booths	
9. Date and time when f	ood booth(s) will be ready to be pe	ermitted
10. Will the event include	e a petting zoo or pony rides?	□ Yes* □ No
*If "yes", how may han	dwashing facilities will be available?	
11. Check the box(es) fo	or the items supplied by the organiz	rer
□ Electricity	□ Refrigeration	□ Drinking Water Hoses
☐ Garbage Pick-up	☐ Grease Disposal	☐ Water Disposal
Please provide more det	ails:	
Water Supply		
	nat best describes the source of pot	cable water for food booths
☐ Public water supplied	by organizer	☐ Water supplied by food vendor
☐ On-site private well (requires testing prior to the event)	□ Other:

please provide the source.		, , , , , , , , , , , , , , , , , , , ,
Toilet Facilities		
available on-site to prevent organizers and/or property o serviced at least once every	a prohibit owners ar seven da s booklet i	ganizer to ensure a sufficient number of potable sanitation units are ted discharge of sewage or cause a public health nuisance. Event te also responsible for ensuring all portable sanitation units are tys, or more frequently if usage requires. (See the Temporary Food for the "Special Event Extended Chart Breakdown" from the Portable
14. What will be used for to	ilet faciliti	es at the event? (Check all that apply)
☐ Central supplied facilities	es	□ Portable toilets
	-	acilities with soap and running water be available? booths, but highly recommended to reduce public health risks of
□ Yes	□ No	

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ORGANIZER APPLICATION

Vendor Information

List all participating vendors (including Mobile Food Units and Pushcarts). *If more space is needed, please write on a separate sheet.*

	Name	Phone #/ Email	General Menu
1			
6			
7			
8			
9	-		
10			
11			
12.			

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STATEMENT: I/we hereby certify that the above information and any attached documents are correct, and I/we agree to comply with all rules and regulations of the Jefferson County Department of Health and hereby authorize the Health Officer or authorized representatives to enter upon the premises of the above named establishments for inspection services. Furthermore, I/we understand that I/we am/are responsible for the following:

- a. To confirm that the requirements and approval of other regulatory agencies, including, but not limited to local fire, building, plumbing, gas, and electrical inspection services department are met prior to operating, and;
- At least 30 days prior to the event/ celebration, I/we will provide the Jefferson County
 Department of Health a list of food vendors who will be allowed in the temporary event/
 celebrations, and;
- c. To ensure that only vendors permitted by Jefferson County Department of Health are allowed to participate in the temporary event/ celebration, and;
- d. To require any unauthorized or un-permitted food vendor found participating in the event to immediately leave the event premises, and;
- To ensure a sufficient number of portable sanitation units are available on-site (if central toilet units are not available or not sufficient) to prevent a prohibited discharge of sewage or cause a public health nuisance, and;
- f. To ensure all portable sanitation units are serviced at least once every seven days, or more frequently if usage requires,

Additionally, I/we understand that non-compliance with the requirements above are considered to be violations of the 420-3-22.12 State of Alabama Department of Public Rules and Regulations, and I/we may be subject to legal action as deemed necessary by Jefferson County Department of Health.

By typing your name, you are agreeing to the terms listed above.

Organizer Signature	Date _				
For Office Use Only					
Approved by	Date				

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