

# TEMPORARY EVENT COORDINATOR APPLICATION



- Coordinators of events containing multiple food vendors are required to complete the application below and submit it to the local Health Protection Offices **AT LEAST 28 DAYS PRIOR TO THE EVENT**. No fee is required.
- This application must be accompanied by an *Application to Operate a Temporary Food Premises* for every vendor that will be serving food at the event.
- Please ensure all fields are filled in below. If a section in the “Event and Venue Details” section is not applicable, please indicate why (i.e., vendor is responsible for individual food storage).
- If approved, a copy of this application will be returned and must be displayed conspicuously onsite for reference.

EVENT INFORMATION		
NAME OF EVENT	NAME OF PREMISES / PROPERTY WHERE EVENT IS HELD (E.G., NAME OF PARK)	
ADDRESS (STREET / CITY)	<input type="checkbox"/> INDOORS <input type="checkbox"/> OUTDOORS	
DATE(S) EVENT WILL BE OPERATING	HOUR(S) EVENT WILL BE OPERATING	
OPENING TIME	ESTIMATED DAILY ATTENDANCE	
NUMBER OF TEMPORARY FOOD SERVICES (Temporary vendors that do not hold a Mobile Food Permit)	NUMBER OF MOBILE FOOD PREMISES (Permitted mobile vehicles and carts)	
WILL THERE BE A PETTING ZOO OR OTHER ACTIVITIES ASSOCIATED WITH THE EVENT? <input type="checkbox"/> YES <input type="checkbox"/> NO      IF YES EXPLAIN _____  WILL THERE BE A TATTOO, PIERCER, OR OTHER BODY MODIFICATION SERVICES OFFERED? <input type="checkbox"/> YES <input type="checkbox"/> NO      IF YES EXPLAIN _____  WILL THERE BE USE OF RECREATIONAL WATER (BEACH, POOL/HOT TUB, SLIP & SLIDE, ETC.) ASSOCIATED WITH THE EVENT? <input type="checkbox"/> YES <input type="checkbox"/> NO      IF YES EXPLAIN _____	<b>PROVIDE A LIST DETAILING THE VENDOR/BUSINESS NAME, ADDRESS CONTACT PERSON, TELEPHONE, EMAIL AND THE SPECIFIC SERVICE PROVIDED BY ALL VENDORS. ONLY THOSE VENDORS LISTED WILL BE CONSIDERED FOR APPROVAL.</b>  <b>PROVIDE A SITE PLAN OUTLINING LOCATION OF VENDORS, FOOD STORAGE, OTHER ACTIVITIES, WATER, WASTE WATER, GARBAGE, ETC.</b>	

COORDINATOR INFORMATION		
NAME OF COORDINATOR	TELEPHONE NUMBER (   )	CELL PHONE NUMBER (   )
MAILING ADDRESS  STREET	FAX NUMBER (   )	E-MAIL ADDRESS
CITY	PROVINCE	POSTAL CODE
NAME OF PERSON IN CHARGE ON DAY OF EVENT	TELEPHONE NUMBER (   )	CELL PHONE NUMBER (   )

**On site food preparation and service to the public shall not commence until the temporary food premises have been approved. Advise your vendors to be set up ahead of the opening time. Coordinators shall be available to attend inspection with the Environmental Health Officer as required by the Environmental Health Officer.**

EVENT AND VENUE DETAILS		
Utility/Facility Type	Requirement	Description Of How Requirement Is Met
Potable Water Supply	Approved water system required. Provide details of hauler on service provider list if applicable.	
Water Distribution	Supply lines suitable for potable water. Backflow preventers provided. Operating prior to event start.	
Hot Water	Hot water must be supplied to all vendors.	
Sanitary Facilities	Portable privies may be required – 12 units per 1000 people.	
Liquid Waste Collection and Disposal	Collected and disposed in a sanitary sewer or other approved disposal site (not on the ground or in storm drains). Provide details of hauler if applicable.	
Solid Waste Collection and Disposal	Properly contained and regular removal to prevent nuisance. Provide details of hauler if applicable.	
Power Supply	All hook ups ready prior to vendor arrival.	
Outdoor Booth Construction	Canopies provided over food preparation and display areas. Located on hard, level surfaces.	
Food Storage - Refrigeration	Shared refrigerated space between multiple vendors must be mechanically refrigerated maintained at 4°C or lower and secure. Adequate space must be provided to allow for adequate airflow and prevent contamination.	
Food Storage – Dry Goods	Secure enclosure, off of ground and pest proof. Shared space must have adequate space and light.	
Utensil Washing and Sanitizing	Commercial dishwasher or three compartment sink supplied with pressurized hot and cold running water and drain boards.	
Hand Washing Stations	Pressurized hot and cold running water dispensed so hands are free for washing. Soap in pump dispensers and single-use paper towels are supplied.	

**APPLICANT SIGNATURE**

*I certify the information enclosed to be true and accurate to the best of my knowledge. I understand that completion of the above requirements is necessary to receive approval to operate the food service portion of the event described in this application. Should I fail to meet the requirements, in accordance with Section 6 of the B.C. Food Premises Regulation, I understand that all or part of the event will not receive approval to operate.*

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ EHO Approval: \_\_\_\_\_