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FARMINGTON VALLEY HEALTH DISTRICT

50 AVON MEADOW LANE, AVON, CT 06001 Telephone (860) 676-1953 Fax (860) 676-2131 800# 1-800-909-FVHD

APPLICATION FOR TEMPORARY FOOD SERVICE PERMIT
SPONSORED BY NON-PROFIT ORGANIZATION

All volunteer or municipal non-profit organizations such as a church, civic club, fraternity and/or charitable group serving food and beverages to the public on a temporary basis are required to have a food service permit. Temporary permits are valid for a maximum of two consecutive weeks.

Please complete the permit application and return it to this office. A copy of the FVHD Food Service Requirements is enclosed to provide you guidance in the planning of your event. ***A CURRENT WATER ANALYSIS MUST BE SUBMITTED IF THE EVENT LOCATION IS SERVED BY A PRIVATE WELL.***

NAME OF EVENT: _____

EVENT LOCATION: _____ TOWN: _____

NAME OF NON-PROFIT ORGANIZATION: _____

ADDRESS: _____

MAILING ADDRESS (IF DIFFERENT): _____

APPLICANT'S NAME: _____ PHONE: _____ FAX: _____

LIST PRIMARY FOOD HANDLERS AT EVENT:

NAME

NAME

NAME

NAME

DATES/TIMES OF EVENT: _____

DATE/TIME OF SET-UP: _____

PLEASE LIST ALL FOODS SOLD/OFFERED INCLUDING CONDIMENTS, ETC. _____

LIST SOURCES OF FOOD _____

WILL EACH OF THESE FOODS BE PREPARED ON SITE OR PRIOR TO THE EVENT? IF PRIOR, WHERE WILL EACH ITEM BE PREPARED? _____

WHAT EQUIPMENT WILL BE USED TO COOK FOODS ON SITE? _____

HOW WILL EACH FOOD ITEM BE HELD TO MAINTAIN PROPER TEMPERATURES PRIOR TO AND DURING THE EVENT?

HOT FOODS _____

COLD FOODS _____

WILL MULTI-USE EQUIPMENT/UTENSILS BE CLEANED ON SITE?

No Yes (Please Describe) _____

DESCRIBE MEANS FOR HANDWASHING IN THE FOOD BOOTH (SEE ATTACHED SKETCH)

WHAT RESTROOM FACILITIES ARE AVAILABLE? _____

DATE OF WATER ANALYSIS _____

(PLEASE SUBMIT A COPY OF THE REPORT)

I agree to abide by the FVHD Food Service Requirements for temporary operations provided with this application.

DATE

SIGNATURE OF APPLICANT

TO BE COMPLETED BY HEALTH DISTRICT

Application Approved _____ By _____

Date Permit Issued _____

Farmington Valley Health District Guidelines

1. **WASH YOUR HANDS!!**
 - Before Starting Your Shift
 - After Using The Restroom
 - After Smoking
 - In Between Handling Food and Money
 - In Between Handling Raw and Cooked Foods.
2. Keep cold foods at **45°** or less.
3. Keep hot foods at **140°** or above.
4. Heat up foods quickly on a range, in a microwave, or on a grill. Do **not** use crockpots or steamtables to heat foods.
5. Use a probe thermometer periodically to check food temperatures. Sanitize the thermometer after each use.
6. **MINIMUM** Cooking temperatures are as follows.
 - Poultry, Stuffing, Reheated Foods - 165°
 - Stuffed Meat, Fish, Pasta - 165°
 - Pork, Pork Products - 145° - Beef 145° - Eggs 145°
 - Ground Beef, Hamburgers - 158°
7. Keep foods covered and protected from contamination.
8. Do **not** thaw foods at room temperature. Thaw overnight in a refrigerator. Do not refreeze foods that have been thawed.
9. Do **not** smoke in the food service area.
10. Do **not** touch ready-to-eat foods (sandwiches, salad, pastries, etc.) with your bare hands.
11. Sanitize all food contact surfaces (tables, counters, etc.) with a solution of 1 teaspoon bleach to 1 gallon of water at the beginning and end of the day, and every **four** hours in between.
12. Utensils (tongs, spatulas, etc.) must be washed and sanitized every four hours. Provide an adequate supply of extra utensils.
13. Dispense eating utensils with handles up.
14. Keep **minimal** amounts of food out at any time.

Temporary Handwashing Station

Min. 5 Gallon
Water Container

Liquid Soap
Dispenser

Paper
Towels

Continuous
Flow Spigot

Min. 5 Gallon
Discard Bucket

****Required** in Each Food Booth