

DEPARTMENT OF ENVIRONMENTAL HEALTH AND QUALITY

P. O. BOX 129261, SAN DIEGO, CA 92112-9261 **PHONE:** (858) 505-6900 **FAX:** (858) 999-8920 **FHDTempEvents@sdcounty.ca.gov**

TEMPORARY EVENT VENDOR PERMIT APPLICATION PACKET

A Temporary Food Facility (TFF) permit is required for anyone that sells or provides food or beverages at a temporary event. If a vendor operates more than one booth at an event, a permit must be obtained for each booth location, and separate applications must be submitted. If a vendor is operating at more than one event in San Diego County on the same day, at the same time, each location must also be permitted separately. This requirement applies to all TFF permit types, including single event permits and annual permits. Vendor applications will not be processed unless there is an Organizer application on file.

NEW PERMIT APPLICANTS

- Submit a complete application for a TFF permit and pay all applicable fees at least 30 days before
 your event. Late fees will apply if the application is received less than 14 days prior to the event start
 date or if there are changes/modifications to the application (including correcting incomplete
 applications or changes in menu, etc.) less than 14 days prior to the event start date.
- Applications can be emailed to fhdtempevents@sdcounty.ca.gov, mailed to P.O. Box 129261, San Diego, CA 92112-9261, or submitted in person at the Department of Environmental Health and Quality (DEHQ) office located at 5500 Overland Ave., Suite 170, San Diego, CA 92123.
- If paying by check, make checks payable to the "County of San Diego."
- Online payments can be made at www.dehqpay.com once you are assigned a record number. Click here for instructions on how to pay online or visit our website.
- If approved, the TFF Vendor permit will be mailed or issued by the Environmental Health Specialist on the day of the event. Until that time, the receipt from your payment will act as a temporary permit.

SINGLE vs. ANNUAL TEMPORARY FOOD FACILITY PERMIT

- Single Event permits are valid for events that take place for 1-4 days. Any events taking place for more than 4 days, but no more than 25 days in a 90-day period, will be charged an annual event fee.
- If you already have a valid annual TFF permit issued by this Department, provide the Event Organizer
 with your permit record number. Your original permit must be kept on-site when open for business during
 your event.
- If this Department has not issued a valid annual TFF permit, complete the Temporary Food Facility Permit application and pay all applicable fees. Applications for annual vendor permits must include a Commissary Agreement Letter and evidence of a Food Safety Manager Certificate.

NONPROFIT CHARITABLE ORGANIZATIONS

- A permit application is required to process a health permit for a nonprofit charitable organization.
- Nonprofit organizations are exempt from permit fees for two Single Event Organizer or Vendor
- permits (or a combination of both) per year. Late fees will apply if the application is submitted less than
- 14 days prior to the event start date. Please note: Permit fee waivers are tracked by an
- organization's Employer Identification Number (EIN).
- Proof of nonprofit status (Federal IRS 501(c)(3) documentation) must be submitted along with the health permit application to receive a fee waiver for the first two permits.
- A 50% reduction in fees will apply to the organization's third and subsequent Organizer and Vendor Permits for the remainder of the fiscal year.

MOBILE FOOD FACILITIES

- Mobile food facilities with a valid San Diego County permit may operate at temporary events without
 additional permits if operating under the scope of their current permit (i.e., mobile truck vendors must
 operate from within their permitted truck). The permit record number information must be provided to the
 Event Organizer. The original permit must be kept on-site when open for business during your event.
- Mobile food facilities permitted in other counties or states must apply for a TFF Vendor permit to operate within San Diego County as part of a temporary event.

COTTAGE FOOD OPERATIONS

- If a Class A or a Class B Cottage Food Operation has a valid registration/permit and is selling products in accordance with the Cottage Food program, no additional permit is required to operate at a temporary event.
- If a Class A or a Class B Cottage Food Operation is providing any open samples or operating outside of the allowances of the Cottage Food Program, the vendor is required to obtain a TFF Permit to operate at a temporary event.

COMPACT MOBILE FOOD OPERATIONS

• Single event vendors do not need to submit a TFF vendor application for an approved event where prepackaged, nonpotentially hazardous food or beverages or whole, uncut produce were provided if it meets the 25 sq. ft exemption. These vendors should still be included on the vendor list. If the vendor does not meet the exemption, a TFF Vendor Permit will be required.

PERMANENT FOOD FACILITIES (RESTAURANTS)

- If a permanent food facility would like to set up a booth to be part of the permitted temporary event as an approved vendor (as indicated on the organizer's vendor list), the facility must obtain a TFF Vendor Permit for the event that is reflective of the type of food to be offered (open or prepackaged).
 - o If a permanent food facility would like to operate a food booth (satellite) directly on their property, the facility would first need to follow DEHQ's <u>Satellite Food Service Operation</u> approval and permitting process. This would include the submittal of <u>Standard Operating Procedures</u> (SOPs) and the need to obtain a health permit to operate a Satellite Operation before starting the temporary event. Please allow 14 days for review and approval.

FOOD DEMONSTRATOR

- Food Demonstrators are permitted to portion food prepared and served at an approved permanent food facility.
- This permit is only allowed when the demonstration is taking place within a permanent food facility (ex. sampling in a grocery store), typically done by a marketing company. This is not a permit typically associated with a traditional community event.

The following are permit types that are **not** approved to operate at a temporary event.

Cannabis or CBD Vendors

DEHQ does not permit vendors selling food or beverage items that contain CBD or THC. Any organizer who wishes to hold an event to allow these types of vendors must contact the California Bureau of Cannabis Control for additional permitting requirements. If the product only contains industrial hemp seeds or industrial hemp seed oil (no cannabis) from an approved source with a CDPH license, then they could be sold prepackaged and shelf stable as a prepackaged food vendor at an approved temporary event.

QUESTIONS

For any questions regarding Temporary Events, contact the Temporary Event Technician at (858) 505-6809 or by email at fhdtempevents@sdcounty.ca.gov. Please also visit our Temporary Event Website at www.sdcountytempevents.org for more information, including FAQs and Vendor Requirements.

For any questions regarding Plan Check requirements, contact the FHD Plan Check Unit at (858) 505-6659 or submit an online <u>Inquiry Form</u>. For any questions regarding catering, restaurants, mobile food facilities, or other types of food permits, please contact the FHD Permits Unit at (858) 505-6666.



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| □New Vendor |
|-------------------------|
| □Existing/Annual Vendor |
| (Record ID): |

TEMPORARY EVENT VENDOR PERMIT APPLICATION

| APPLICANT INFORMATION | | | | | | | |
|---|--|--------------------|--------------|-------------|-----------------|--|--|
| Food Booth Name: | | Applicant Name: | | | | | |
| Mailing Address (required): | | City, State (requi | red): | | Zip (required): | | |
| Email Address (required): Phone Number (required): | | | | | | | |
| PERSON | I IN CHARGE DAY OF (Check here if same | | ORMATION | | | | |
| Name (required): | Email Address (required): Cell Phone Number (required): | | | | d): | | |
| | OWNER INFO | | | | | | |
| Name (required): | Email Address (required): | | Phone Number | (required): | | | |
| Mailing Address (required): | | City, State (requ | ired): | | Zip (required): | | |
| Type of Ownership (required): Government Agency Non-Profit Partnership Sole Owner If you are part of a Community Event, provide CEP record number: If you are a Non-Profit, provide: Non-Profit Name: 501(c)(3) number: Are you claiming a Veteran's Exemption? Yes* No *If yes, read our FAQs document and fill-out the Veteran's Exemption Affidavit Form. | | | | | | | |
| | BILLING CONTACT (Check here if same | | | | | | |
| Name (required): | Email Address (required): | | Phone Number | (required): | | | |
| Mailing Address (required): | L | City, State (requ | ired): | | Zip (required): | | |
| We are committed to enhancing communication and services to our customers. In support of this effort, we are seeking information on the primary languages spoken by you and your staff. This information will allow FHD to continue to translate various applications and informational materials. | | | | | | | |
| Preferred Language: ☐ Arabic ☐ Chinese – Cantonese ☐ Chinese – Mandarin ☐ English ☐ Farsi ☐ Filipino ☐ Japanese ☐ Karen ☐ Korean ☐ Somali ☐ Spanish ☐ Vietnamese ☐ Other ☐ Chinese – Mandarin ☐ English ☐ Farsi ☐ Filipino Preferred Secondary Language: ☐ Arabic ☐ Chinese – Cantonese ☐ Chinese – Mandarin ☐ English ☐ Farsi ☐ Filipino | | | | | | | |
| ☐ Japanese ☐ Karen ☐ Korean ☐ Somali ☐ Spanish ☐ Vietnamese ☐ Other | | | | | | | |
| | EVENT INFO | RMATION | | | | | |
| Temporary Event Name: | | Event Start Date: | | Event End | Date: | | |
| Days and Hours of Operation: | | | | # of Days i | n Operation: | | |
| Event Location (Address): | | City, State: | | | Zip: | | |

ANNUAL VENDOR APPLICANTS MUST SUBMIT THE FOLLOWING WITH YOUR APPLICATION:

Applications that are missing information or the required documents below will not be processed.

- Copy of your Food Safety Manager certificate (if unpackaged/open food).
- <u>Commissary Letter of Agreement</u>. If using an <u>Out of County Commissary</u> and traveling more than 30 minutes to the event, submit an SOP that includes food temperature control/monitoring, a copy of the commissary's health permit, and the most recent inspection report.
- If applying for an annual permit, please include your first event's information above.

| WAREWASHING FACILITY/FACILITIES (For unpackaged vendors only) | | | | | | |
|---|--|---|--|--|--|--|
| ☐ Self-Provided | ☐ Organizer-Provided | ☐ Agreement with food facility within 200 ft (must complete Appendix A) | | | | |
| | | | | | | |
| | PERMIT TYPES (see fe | ee schedule for current fees) | | | | |
| Prepackaged Foods/Bevera No food/beverage preparation ta | | % prepackaged foods. No sampling is allowed. | | | | |
| ☐ Single Event Per | mit (1-4 days) | | | | | |
| ☐ Annual Permit (M | fulti-event/Yearly) | | | | | |
| Unpackaged Foods/Beverage | ges | e food/beverage preparation and sampling. | | | | |
| ☐ Single Event Per | mit (1-4 days) | | | | | |
| ☐ Annual Permit (M | fulti-event/Yearly) | | | | | |
| | ontainer or the service of non-poten | ration other than dispensing from the approved container or draft, directly tially hazardous beverages that requires the mixing of ingredients and | | | | |
| ☐ Single Event Per | mit (1-4 days) | | | | | |
| ☐ Annual Permit (M | fulti-event/Yearly) | | | | | |
| Food Demonstrator (Within Portioning of food made and ser a permanent food facility (ex. sa | ved at an approved permanent food | d facility. This permit is only allowed when the demonstration occurs within | | | | |
| ☐ Single Event Per | mit (1-4 days) | | | | | |
| ☐ Annual Permit (N | fulti-event/Yearly) | | | | | |
| Single Location Swap Meet 100% prepackaged, non-potenti Temporary Event Organizer. | Vendor ally hazardous foods. The operation | nal scope is limited to a single fixed Swap Meet Location without a | | | | |
| ☐ Single Location S | Swap Meet | | | | | |
| permit and most recent inspection | ty that is not currently permitted in S | San Diego County for a single event. Provide a copy of your current health for an annual mobile food facility permit, please contact our Plan Check ermit approval process. | | | | |
| ☐ Out of County/Ur | npermitted Mobile Food Facility | | | | | |

| Nonprofit Vendor Eligible for two fee-exempt permits per fiscal year for the entire organization. A copy of your 501(c)(3) letter must be attached to this application |
|--|
| ☐ A copy of your 501(c)(3) letter must be attached to this application. |
| Fee Exempt Permit |
| ☐ <u>Veteran's Fee Exemption Affidavit</u> (Click <u>here</u> for Veteran FAQs) |
| ☐ Confirmation of Legal Blindness Form |
| Late Application Fee |
| ☐ Applies if the application is submitted or modified less than 14 days prior to the event start date. |
| Make checks payable to "County of San Diego" Ensure that a valid email address is provided. An invoice and payment instructions will be emailed to you once your application has been processed. Prorated billing is not available. Credits or refunds cannot be issued after your application has been processed, regardless of participation in the event or inspection by this Department. |

| As the Tem | nporar | EVENT VENDOR ACKNOWLEDGEMENTS y Food Facility owner/operator, you acknowledge that you understand your roles and responsibilities by initialing the following statements. |
|------------|--------|--|
| | 1 | Single Event Vendors – I acknowledge that all food and beverage preparation will be done on-site at the event, or I will be preparing food off-site ONLY at a permitted food facility (no home preparation is allowed). |
| | | Annual Event Vendors – I acknowledge that any food preparation conducted off-site will be at my approved commissary location. I will complete and submit a Commissary Letter of Agreement |
| | 2 | All potentially hazardous cold foods or beverages shall be held at or below 45°F at all times, including during transportation. Any food held between 42°F and 45°F must be discarded at the end of the day. Any food held at or below 41°F may be returned to the commissary at the end of the event. |
| | 3 | All potentially hazardous hot foods shall be held at or above 135°F at all times and must be discarded at the end of the day. |
| | 4 | Rapid reheating/cooking devices (e.g., flat grill, BBQ) must be available and capable of reheating food to 165°F within two hours. Steam tables, heat lamps, and crockpots are not designed for rapid reheating. |
| | 5 | Hot-holding devices (e.g., steam table, heat lamp) must be capable of holding hot foods at or above 135°F at all times. |
| | 6 | A probe thermometer for checking internal food temperatures must be on-site and available for use at all times. |
| | 7 | A handwashing station with warm water (100-108°F), a hands-free spigot providing a continuous stream of water that leaves both hands free for vigorous rubbing, dispensed soap, paper towels. A catch basin is required to be set up within the food preparation area and easily accessible for use before beginning any food preparation and must be maintained supplied throughout the event. |
| | 8 | All food handlers have been trained in food safety. For annual vendors: A Food Safety Manager course has been completed, and a copy of the certificate is provided with this application. |
| | 9 | All booths must have overhead protection, and open food preparation areas must be fully enclosed to protect the food from outside contamination. |
| | 10 | A smooth and easily cleanable floor will be used if the booth is located on dirt or grass (booths located on asphalt/concrete do not require additional flooring). |
| | 11 | The application must be received at least 14 days before the event. All late applications will be assessed a late fee at the time of processing. I understand a supplemental fee will be invoiced, in addition to the required permit fee, if the application submittal and/or modifications to the original application are submitted less than 14 days before the event start date. Modifications include, but are not limited to, correcting incomplete applications or changes to the menu, participating vendors, warewashing facilities. |
| | 12 | No ill employees will be working with food, food contact surfaces, or equipment. |
| | 13 | I understand that failure to meet the conditions approved in this application may result in the suspension of approval to operate the event, suspension of the approval to operate the affected food booths, and/or may result in the filing of misdemeanor charges. California Retail Food Code Section 114395. |
| | 14 | I understand that I am responsible for obtaining approval from all applicable agencies, including the local fire department, planning department and Alcohol Beverage Control. |

| 15 | | ed up to three times the permit fee if found operating nderstand that permits are non-transferable. |
|---|---|---|
| Print Name: | | Title: |
| are correct a issuance of t information I | nd true. I consent to all necessary in the his permit and the operation of this | st of my knowledge and belief, the statements made herein inspections made according to law and incidental to the business. I understand and hereby consent to any to be considered a public record subject to disclosure under |
| V | | |
| Χ | | |
| Applica | int Signature | Date |

APPENDIX A WAREWASHING FACILITY AGREEMENT

Warewashing facilities must be provided when open/unpackaged food vendors are operating at a temporary event and the length of the temporary event (including food vendor set-up time), is 4 hours or longer.

| | | | EVENT VEND ed by the Temp Eve | | |
|---------------------|-------------------------------------|----------|-----------------------------------|----------------|---------------------------------------|
| Food Booth Name: | | | ent Name: | · | |
| Event Address: | | | City, State: | | Zip Code: |
| Event Start Date: | Event End Date: | | Event Time: | Owner Phone #: | |
| (This section s | W /A hould be completed by t | | ING FACILITIE Owner allowing the | | shing facilities) |
| Business Name: | · · · · · | Pe | ermit #: | | · · · · · · · · · · · · · · · · · · · |
| Address: | | | City, State: | | Zip Code: |
| Days of Operation: | | Ног | urs of Operation: | | |
| Contact Name: | Title: | l | | Phone #: | |
| | S REQUIRED | | | | WASH EQUIPMENT ENT DURING THE |
| Warewash Facility R | epresentative (Si | gnature) | | | Date |
| Temp Event Vendor | (Signature) | | | | Date |

APPENDIX B

| MENU (List all food/beverage items, including toppings, garnishes, and prepackaged foods). | | | | | | | |
|---|--------------|------------------|--------------------|-------|----------|-----------------------------|--|
| FOOD/BEVERAGE | HOW SERVED | MADE TO ORDER | PREP AT COMMISSARY | | SAMPLING | DESCRIBE PREPARATION METHOD | |
| | □ HOT □ COLD | □ YES | □ YES | □ YES | ☐ YES | | |
| | □ HOT □ COLD | □ YES | □ YES | □ YES | ☐ YES | | |
| | □ HOT □ COLD | □ YES | □ YES | □ YES | ☐ YES | | |
| | □ HOT □ COLD | ☐ YES | □ YES | □ YES | ☐ YES | | |
| | □ HOT □ COLD | ☐ YES | □ YES | □ YES | ☐ YES | | |
| | □ HOT □ COLD | □ YES | □ YES | □ YES | ☐ YES | | |
| | □ HOT □ COLD | □ YES | □ YES | □ YES | ☐ YES | | |
| | □ HOT □ COLD | □ YES | □ YES | □ YES | ☐ YES | | |
| | □ HOT □ COLD | □ YES | □ YES | □ YES | ☐ YES | | |
| | □ HOT □ COLD | □ YES | □ YES | □ YES | ☐ YES | | |
| | □ HOT □ COLD | ☐ YES | □ YES | □ YES | ☐ YES | | |



DEPARTMENT OF ENVIRONMENTAL HEALTH AND QUALITY FOOD, WATER, AND HOUSING DIVISION P.O. BOX 129261, SAN DIEGO, CA 92112-9261

Phone: (858) 505-6900 ♦ Fax: (858) 999-8920 ♦ www.sdcdehq.org

COMMISSARY/HEADQUARTERS LETTER OF AGREEMENT THIS LETTER MUST BE RENEWED ANNUALLY

Sections 114295, 114339, and 114341 of the California Retail Food Code require that all Mobile Food Facilities and Annual Temporary Food Facilities operate in conjunction with a commissary, mobile support unit or other facility approved by the local regulatory agency.

| I) THIS SECTION TO BE COMPLET | TED BY THE FOOD FACILITY | / OWNER | |
|---|--------------------------|-------------------------------|---|
| Facility Name: | _ Health Permit Num | ıber: | |
| Facility Mailing Address: | | _ City: | Zip: |
| | Street Name | | |
| Permit Owner Name: | | _ Phone: () | |
| Fax: () | E-Mail: | | |
| II) THIS SECTION TO BE COMPLE | ETED BY THE COMMISSARY | /HEADQUARTERS | OWNER |
| The above food facility has my per PURPOSES OF ESTABLISHING CATERING OR FOOD PROCESSII following: (Check all that apply) | A COMMISSARY, HEADQ | UARTERS FOR | THEIR MOBÎLE FOOD, |
| □ Food Preparation □ Food Storage □ Warewashing Facilities □ Vehicle/Cart Washing Area □ Fresh Water Supply | J | □ Ice Produ ea □ Used Code | Machine Storage uction oking Oil Disposal |
| Commissary/HQ | | | |
| Facility Name: | | _ Health Permit Num | ıber: |
| Address: Street No. Street Name | | _ City: | Zip: |
| Permit Owner Name: | Signature: | Ph: | one. |
| Print Owner Name | Oignataro | 1 | JII6 |
| E-mail address: | | De | ate:// |
| OFFICE USE ONLY | | | |
| VERIFICATION OF HEADQUART | TERS | | |
| Vending Year: 20 Other Age | | Permit: ☐ Yes ☐ |] No □ N/A |
| Verified By (initials): | Date of Approval: | / _ | |



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CARTA DE AUTORIZACIÓN PARA EL USO DE LA COMISARÍA ESTA CARTA DEBE RENOVARSE ANUALMENTE

Las secciones 114295, 114339, and 114341 del Código de Comida al Menudeo requieren que todas las Unidades Móviles de Comida (permanentes y temporales), tengan una comisaría, una unidad de apoyo o algún otro tipo de negocio aprobado por la agencia local que les proporcione apoyo en sus operaciones.

I) EL DUEÑO DEL NEGOCIO DEBE COMPLETAR ESTA SECCIÓN:

| Dirección de | | Número de Permiso de | e Salud: | | Código |
|--|--------|--|----------|----------|--|
| Correo: | | Ciudad: | | | _ Postal: |
| Nombre de la Calle Nombre del Dueño: | | Teléfono: (| | | |
| Fax: () | | Correo | | | |
| II) EL DUEÑO DE LA BODEGA DE A | BAR | ROTES/COMISARÍA DEBE CO | MPLE | TAR | ESTA SECCIÓN |
| El negocio que se describe arrib ABARROTES/COMISARIA para su ur para las actividades marcadas a contil | nidad | móvil de comida. Esta carta los | | | |
| □ Preparar alimentos | | Tirar la basura | | | lmacenar la máquina xpendedora de comida |
| ☐ Almacenar alimentos | | Usar el drenaje con interceptor de grasa para tirar agua sucia | e [|] T | ener acceso a hielo |
| ☐ Lavar utensilios en el fregadero de tres compartimientos | | Estacionar la unidad | | | lsar el contenedor para esechar el aceite usado |
| ☐ Lavar la unidad móvil | | Almacenar productos químicos y c limpieza | de | | |
| ☐ Abastecerse de agua limpia | | Limpiar la máquina expendedora comida | de | | |
| Nombre de la Bodega o Comisaría: | | Número de Permiso de | | | |
| Dirección: | | | | | Código |
| No. de la Calle Hombie de la C | alle | | | | |
| Nombre del Dueño de la Bodega/Comisaría | | Firma del Dueño de la Bodega/Comis | saría | Tel | léfono |
| Correo Electrónico: | | Fecha: _ | | <u> </u> | |
| OFFICE USE ONLY | _ | | _ | | |
| VERIFICATION OF HEADQUARTE | ERS | | | | |
| Vending Year: <u>20</u> Other Agend | cy – (| Copy of Current Health Permit: | □ Yes | | No □ N/A |
| Verified By (initials): Da | ite of | Approval: /// | _ | | |