

VENDOR LICENSE APPLICATION FOR TEMPORARY/SPECIAL
RETAIL FOOD SERVICE ESTABLISHMENT

****Incomplete applications or applications without payment will not be processed****

A Jefferson County License is required to operate at Temporary/Special Events in Jefferson County. Applications must be submitted 14 days prior to your first event. Approval cannot be guaranteed on any applications submitted after this time period. Please plan ahead to schedule accordingly.

****If you plan to operate in Jefferson County you must obtain approval from this office****

LICENSE FEE: (payable to Jefferson County Treasurer)

Temporary Vendor (Full Food Service)

- Complete** applications received by this office 14 days or more before the event date \$145.00
- Complete** applications received by this office 13 days or less before the event date \$175.00

Temporary Vendor (Pre-Packaged)

- Complete** applications received by this office 14 days or more before the event date \$125.00
- Complete** applications received by this office 13 days or less before the event date \$155.00

Department Contact: Terri Leichtweis 303-271-5776 tleicht@jeffco.us

Please complete the following:		
Temporary Retail Food Establishment Name	Legal Owner's Name	
Name of Primary Contact		
Establishment Mailing Address (Street Address and P.O. Box)		
City	State	Zip Code
Telephone Number ()	Best Contact #	
Fax #	E-mail	

Will you be operating more than one booth at any given time? () YES () NO

NOTE: You must have a separate Jefferson County License for EACH booth you operate.

List all events that you will participate in and the dates

NOTE: If you are attending more than 1 event on the same date you must have a separate Jefferson County License for each event you are attending.

Event Name	Date	Location

2. FOOD PREPARATION BEFORE THE EVENT

All slicing, chopping, peeling, dicing, shredding, mixing, and pre-washing must be done at an approved commissary. Food prep is not allowed to take place at the event. Food may not be cooked or stored at home. Please complete this section AND the Affidavit of Commissary on Page 7.

I will not be processing any food items prior to the event, skip to #3.

Cooling of Foods (that have been previously cooked)

List specific foods to be cooled:

Food Item	Cooling Method (see choices below)

Foods must be rapidly cooled to 41°F or below.

- Shallow pans (less than 4”) in refrigerator or cooler
- Ice paddle or wand
- Using an ice-bath to cool the food product
- Other (specify)

Reheating of Foods

List specific foods to be reheated:

Food Item	Reheating Method (see choices below)

Foods must be re-heated to at least 165°F.

- Microwave oven
- Conventional oven
- Hot plate
- Grill
- Other (specify)

Food Transportation

What equipment will you use to control food temperatures during transport from the commissary to the event? (mark all that apply)

- Coolers with Ice Refrigerator Cambros for hot foods
 Other (specify) _____

NOTE: Containers/coolers made from Styrofoam are not approved for use

3. FOOD HANDLING AT THE EVENT

NOTE: Unwrapped food on display must be properly covered or protected by sneeze guards

Hot Food Items

How will hot foods be cooked to the minimum required temperature at the site? (mark all that apply)

- Grill Hot plate Microwave Deep fat fryer Oven

Other (specify) _____

How will hot foods be held at 135° F or greater at the event? (mark all that apply)

- Hot holding unit Steam table Held on grill until served
 Held under heat lamps Crock Pot Served immediately after cooking

Other (specify) _____

NOTE: Equipment utilizing fuel-gel canisters (i.e. Sterno®) are NOT allowed at Temporary Events

Cold Food Items

How will cold foods be held at 41° F or below at the event? (mark all that apply)

- Refrigerator / freezer
 Ice chest - must be drainable and foods may not be kept in contact with the ice unless they are packaged and sealed. All ice must be commercially manufactured.

How will you allow for sufficient ice throughout the entire event? _____

Other (specify) _____

What type of food thermometer (0-220°F) do you have?

- Metal stem probe Thermocouple Digital

How will food contact surfaces be cleaned and sanitized at the event? _____

Sanitizer type (i.e. Chlorine or Quaternary Ammonia): _____

NOTE: Appropriate test strips will be required on-site

Where will utensil washing take place?

- At the commissary Commercial 3-compartment sink unit (i.e. part of a mobile unit)

NOTE: On-site washing in tubs/basins is NOT allowed, extra utensils must be provided so soiled items can be changed at a minimum of every four (4) hours.

Where will potable water be obtained?

- Commissary On-site source (any hoses used to provide water must be food-grade)
 Other _____

Where will wastewater be disposed?

- Commissary Approved on-site receptacle at event Other _____

Waste water SHALL NOT be dumped on the ground or into storm sewer drains. Waste water must be dumped in an approved receptacle or sanitary sewer.

4. HANDWASHING AND FOOD HANDLING AT THE EVENT

NOTE: Hand washing facilities must be located immediately adjacent to any/all food handling areas

- A hand-washing station WITHIN each booth or unit is REQUIRED unless only prepackaged foods requiring no preparation and/or cooking are to be served. Please note the new regulation that requires that **"A basin that is capable of capturing hand washing waste water and conveying it into a closed waste water container shall be provided"**.

Please check the space below that applies to your booth/unit.

- I will be serving only prepackaged foods that require no preparation and/or cooking. (skip to #5)
- I will be serving foods that require preparation and / or cooking and will provide for hand-washing.

THE DRAWINGS ON THE LEFT SHOW ACCEPTABLE HAND-WASHING STATION COMPONENTS:

OPEN wastewater container not acceptable



NOTE:

Hand sanitizers are NOT an acceptable substitute for required hand-washing station!

How will you prevent bare hand contact with ready to eat foods?

- Tongs Food-grade disposable gloves 'Deli' tissues
- Other (list) _____

5. BOOTH LAYOUT

On this page, provide a drawing of the Temporary Food Establishment /Booth. Identify and describe all equipment. The drawing should include the following (if applicable):

- | | |
|--|---|
| <input type="checkbox"/> Cooking equipment | <input type="checkbox"/> Hot and cold holding equipment |
| <input type="checkbox"/> Hand washing facilities | <input type="checkbox"/> Work surfaces |
| <input type="checkbox"/> Food and single service storage | <input type="checkbox"/> Garbage or trash containers |
| <input type="checkbox"/> Customer service area | <input type="checkbox"/> Potable water lines |

Booth Layout



CERIFICATION OF APPLICANT

By signing below, I agree that I will operate my booth in accordance with Chapter 10 of the Colorado Retail Food Establishment Rules and Regulations and will immediately correct any violations found during an inspection. My **original** Jefferson County License will be posted. I also understand that my License to operate may be suspended or revoked for non-compliance with these requirements and I may be removed from the event.

Signature

Date

JEFFERSON COUNTY PUBLIC HEALTH
 645 Parfet Street, Lakewood, CO 80215
 (303) 232-6301 FAX (303) 271-5760
jeffco.us/public-health

A F F I D A V I T O F C O M M I S S A R Y

*NOTE: Any off-site preparation of either hot or cold food items for mobile units and / or temporary food booths must take place only in an approved Retail Food Establishment (a "commissary"). The owner / operator of the mobile unit or food booth shall complete and sign PART 1. The owner / operator of the commissary shall complete and sign PART 2. **Vendors operating for more than one day in duration must operate from an approved commissary within 30 minutes or 30 miles of the event.***

PART 1

Mobile Unit / Food booth name: _____

Owner name of above: _____

STATEMENT / CERTIFICATION OF OWNER OF MOBILE UNIT / TEMPORARY BOOTH

By signing below, I hereby state that I will use the Retail Food Establishment shown below as my commissary for the preparation and storage of food items, cleaning of equipment and utensils and other uses as mandated by the Colorado RETAIL FOOD ESTABLISHMENT RULES and REGULATIONS.

 Signed

 Date

PART 2

Please complete the following for the facility that will be used as your commissary:

Commissary or Restaurant Name		County	
Physical Address		Owner Name	
City and ZIP		Phone	

STATEMENT / AFFIDAVIT of COMMISSARY OWNER

By signing below, I state that I am the owner / manager of the above approved Retail Food Establishment and that I have authorized the owner of the above referenced mobile unit / temporary food booth to use my facility as a commissary for the storage and preparation of food and, if applicable, the washing and sanitizing of equipment and daily servicing of the mobile food unit. I agree to maintain written documentation or a log of when the owner uses my commissary and to provide it to the Department upon request. This authorization is valid through the end of the current calendar year.

 Signature

 Date

 EH Staff verification of commissary

 Date