Skagit County Public Health 700 South 2nd Street, #301

700 South 2nd Street, #301 Mount Vernon, WA 98273 Phone: 360-416-1500 Fax: 360-416-1501 www.skagitcounty.net/food EH@co.skagit.wa.us



| EH Permit ID: | | |
|---------------|------------|---|
| Fee: | Receipt #: | 2 |
| Received by: | Date: | |
| | | |

APPLICATION for LOW RISK TEMPORARY EVENT

A Temporary Food Establishment found operating without a permit will be charged double the usual permit fee

| PERMIT FEES – FEES ARE NO | REFUNDABLE | ALL 4 pages must | be completed. | | | |
|---|------------------------|---------------------------|-----------------------|-----------------|--|--|
| Limited low risk temporary events must meet the following conditions: Only foods from the low risk list may be offered (see page 2) | | | | | | |
| ☐ Single event - \$50.00 − Temporary event 21 consecutive d | ays or less in a singl | e location for a single e | vent or festival wit | th a fixed menu | | |
| Late Fee \$50.00 - Application re | eceived less than 14 | days before event | | | | |
| I will pay by cash | credit card Pe | erson and number to cal | ll for credit card: _ | | | |
| | | | | | | |
| | | | | | | |
| Event Name: | | | | | | |
| Event Hume. | | | | | | |
| Event Address: | | | | | | |
| | | | | Include city | | |
| Date(s) of Operation: | | | | Serving Time: | | |
| List all dates at event for prep and food serv | | (Example: 8AM to 2: | :30PIVI) | | | |
| Check days of operation: M | JT ∐ W ∐Th ∐ | FSa Su | | | | |
| | | | | | | |
| | | | | | | |
| Vendor/Business name: | | | _ Legal Owner: | | | |
| Person in charge (PIC) on site | (must have food worker | card): | | | | |
| Applicant name (must be owner or | officer of owner): | | | | | |
| (Your phone number or email will n | | | | | | |
| F. mail: | | | | | | |
| E-mail: | | | | | | |
| Mailing address: | | | | | | |
| City/State/Zip: | | | | | | |
| Applicant phone#: | | | | | | |
| | | | | | | |
| | | | | | | |

4/11/19 de Page 1 of 4

LOW RISK FOOD LIST

at your LOW RISK Temporary Event. If your menu does not match this list then you do not qualify for this permit. Contact the Health Department at 360-416-1500 or EH@co.skagit.wa.us to determine the appropriate permit. Baked goods made in a commercial facility, may be shelf stable or require refrigeration Commercially canned/factory sealed packages of chili, soups, baked beans or other USDA/FDA/WSDA processed foods that do not require cooking for safety. These foods may be heated and hot held prior to service. Corn dogs, hot dogs, precooked sausages, ham or other USDA-certified pre-cooked meats ready to eat from the original package Intact (unopened) frozen packages of raw meat or raw fish sold at a farmers market with no cooking, portioning or unwrapping Pasteurized dairy products, espresso drinks, commercial beverage mixes, or commercially frozen fruit Pancakes, funnel cakes, donuts, or other fried dough products made from a commercial powder mix and water Sno-cones or other ice based drinks or foods made with commercially purchased ice and commercial syrups or mixes Nachos using commercially processed cheese French fries, onion rings, other deep fried vegetables made from frozen, packaged product Commercially pre-washed non-melon fruit or onions cut on site Commercially made pizza from a licensed restaurant, hot held, sold by the slice Cold appetizer, dessert or other trays prepared at a commercial facility and served cold Please answer all questions. There may be a delay in permitting for incomplete applications. YES NO Is this a mobile food vehicle (does it require a vehicle license)? IF YES – Vehicle License #_____ Attach photo of Washington State L&I Permit Will food be prepared at a location other than where served (referred to as a commissary)? Yes Must be licensed food establishment If Yes, complete and submit Commissary Agreement form unless you are the Permit Holder for the commissary location. Form can be found at www.skagitcounty.net/food. Cold holding equipment and methods: Heating equipment (i.e. grill, stove, BBQ):_____ *If heating, have you been inspected or approved by the Fire Marshal? NO YES If no, please contact the jurisdictional fire marshal for the event location. Hot-holding equipment (i.e. steam table, oven): How and where will you wash, rinse, sanitize dishes, utensils, equipment? **DESCRIBE Booth or Building Construction:** Must have walls, floor and overhead protection

Foods allowed to be served at a LOW RISK Temporary Establishment are LIMITED to the list below. Check ALL foods to be served

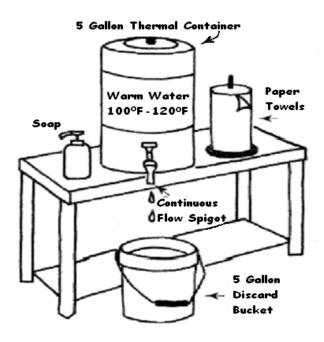
4/11/19 de Page 2 of 4

| Bare hand contact with ready to eat foods will be eliminated b | y: |
|--|-----------------------|
| gloves, utensils, tongs, deli paper, Other barriers: _ | |
| Water source for washing/drinking: PUD Anacortes | Other Group A system: |
| Group B water system | name: |
| | |
| Wastewater disposal location:Res | troom location: |

Hand wash station- Requires warm flowing water, liquid soap, paper towels and waste water collection Must be present in booth

Restroom handwashing sinks cannot replace your handwashing station.

Temporary Hand Washing Station



The temporary handwashing station shall consist of at least a 5-gallon insulated container with spigot that provides a continuous flow of warm (100°F-120°F) running water, soap, paper towels and a 5-gallon bucket to collect the dirty water.

Complete the table below for each menu item to be served at the Low Risk Temporary Food Establishment. Cooling of hot food is NOT allowed at a Temporary Establishment. All hot food at a temporary event must be disposed at the end of each service day.

For each food listed enter an X in the boxes that apply. Leave boxes blank if they do not apply. Two examples are provided.

| Food | Source of food (where is food purchased or obtained) | Commercially pre-made | Commercially pre-cooked | Commercially pre-washed | Transport cold to event | Cut/chop | Assemble | Keep cold | Heat to hot hold | Heat to serve |
|-----------------------|--|--------------------------|----------------------------|----------------------------|-------------------------|----------|----------|-----------|---------------------|---------------|
| Potato salad | Costco | Χ | | | Χ | | | Χ | | |
| Pulled pork | Cash and Carry | Χ | Χ | | Χ | | | | Χ | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| ADDITIONAL ACDEENSENT | | | | | | 1 | | | | |

APPLICANT AGREEMENT

I hereby consent to inspection by the Skagit County Public Health and acknowledge that issuance and retention of this permit is contingent upon satisfactory compliance with state and local temporary food service requirements. I have read and understand the requirements for safe food service.

| Signature: | | | Date: | FOR | | | |
|--------------------------------|-----------------------|-------|-------|-----|--|--|--|
| FOR HEALTH DEPARTMENT USE ONLY | | | | | | | |
| | Application approved: | Date: | | | | | |

4/11/19 de Page 4 of 4