

Skagit County Public Health

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 #: _____

Received by: _____ Date: _____

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APPLICATION for TEMPORARY FOOD ESTABLISHMENT

(this is for food that does **NOT** meet **Limited Low Risk guidelines**)

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

Please answer all questions. There may be a delay in permitting for incomplete applications.

PERMIT FEES – FEES ARE NOT REFUNDABLE All 4 pages need to be completed.

Single \$145.00 –

Temporary event 21 consecutive days or less in single location for a single event or festival with a fixed menu

Late fee \$50.00: Event within 14 days

I will pay by cash check credit card (person and phone number for credit card payment) _____

Event Name: _____

Event Address: _____

Include city

Date(s) of Operation: _____ **Prep Time and Date:** _____ **Serving Time:** _____

List all dates at event for prep and food service

(Example: 8AM to 2:30PM)

Check days of operation: M T W Th F Sa 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 e-mail will not be distributed for commercial purposes)

E-mail: _____

Mailing address : _____

City/State/Zip: _____

Applicant phone#: _____ **PIC phone#:** _____ **Alternate phone #:** _____

Will food be prepared at a location other than where it is being served (referred to as a commissary)?

No Yes Must be licensed food establishment or approved with temporary permit

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.

Use of a commissary located outside of Skagit County will only be approved if you are the Permit Holder for the Commissary. To receive approval for out of county commissary provide a copy of the current food establishment permit and most recent inspection. (approval may be delayed without this information)

Name of Commissary: _____ Street Address: _____

City/State/Zip: _____ Is Commissary a Licensed Food Establishment? :No Yes

Date(s) and Time you will be using the commissary for Preparation: _____

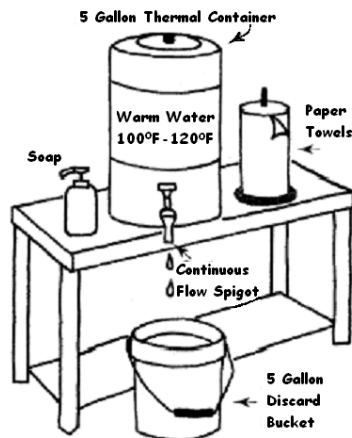
Is this a mobile food vehicle (does it require a vehicle license)? NO YES

IF YES – Vehicle License # _____ Attach photo of Washington State L&I Permit

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 Temporary Food Establishment. Cooling of hot food is ONLY allowed at a licensed commissary kitchen approved for cooling of hot foods. All hot food at a temporary event must be disposed at the end of each service day. No cooling of hot foods is allowed at events.

For each food listed enter the applicable letter code in the boxes. Leave boxes blank if they do not apply.

Two examples are provided.

C = At approved commissary

T = At temporary event

X = Use for method of transport

Food	Source of food (where is food purchased or obtained)	Thaw	Wash (as in produce)	Cut/chop	Assemble	Cook from raw	Cool after cooking	Keep cold	Reheat	Transport cold to event	Transport hot to event
Pre-made potato salad	Costco							T		X	
Pulled pork	Cash and Carry	C				C	C	C	T	X	

Is produce purchased commercially pre-washed? NO YES NA (not serving produce)

If No, describe where and how produce will be washed:

Cold holding equipment and methods: _____

Cooking equipment (i.e. grill, stove, BBQ): _____

*If cooking, 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? _____

Water source for washing/drinking: PUD Anacortes Other Group A system: _____

Group B water system name: _____

Wastewater disposal location: _____ Restroom location: _____

DESCRIBE Booth or Building Construction:

Must have walls, floor and overhead protection

Bare hand contact with ready to eat foods will be eliminated by:

gloves, utensils, tongs, deli paper, Other barriers: _____

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 HEALTH DEPT. USE ONLY

Application approved: _____ Date: _____