

Date(s) of Event:

Redwood-Renville Community Health Services

105 S 5 St; Room 119H • Olivia, MN 56277 Phone 320/523-2570 • Fax: 320/523-3749

| OFFICE USE ONLY |
|-----------------|
| Date rec'd |
| Check # |
| Amount paid \$ |
| Approved by |
| License # |

SPECIAL EVENT FOOD STAND LICENSE APPLICATION

Special event food stands are operated in conjunction with celebrations and special events, and are operated no more than three times annually for no more than ten total days.

Complete one form for <u>EACH</u> event. Application must be received at least four business days before the event to avoid late fees.

Please be specific and print legibly.

Name of Event: City of Event:

Time of food stand operation: From______ To:_____

Location of food stand:

From:______ To:_____

| Organization: | | | | | |
|---|--|--|--|--|--|
| Contact Person:_ | | | | | |
| Mailing Address (license will be mailed to this address): | | | | | |
| City/State/Zip: | | | | | |
| Phone: | Cell phone: | | | | |
| E-Mail Address: | | | | | |
| FOOD OR BEVERAGE TO BE SERVED | NAME OF FOOD SUPPLIER (meat must be USDA approved or MN equal to) | PLACE AND DATE OF FOOD PREPARATION (food prepared or stored at home is not allowed) | EQUIPMENT USED IN PREPARATION AND COLD OR HOT HOLDING (crock pots are not permitted, mechanical refrigeration required for events longer than 4 hours) | | |
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| <u>I understand</u> : (initial each line after reading, check appro | priate boxes) | |
|---|--|---|
| The food stand must have a designated person in comparison. The person in charge must inform all food workers to they are ill or have recently been ill with diarrhea or water must be from an approved source. Water is a Municipal water system Other (specify water source) Facilities must be provided for proper hand washing are not adequate for washing hands.) Choose one: | that they must not work in the for vomiting or other communicable obtained from (check one): | |
| Water supplied under pressure at a perman supplied with soap, fingernail brush and paper to Water supplied by gravity at a temporary hand at right) with soap, fingernail brush and paper to Washing dishes and utensils must be done in the formal supplied to the supplied with soap. | owels. wash station (pictured wels. | HANDWASHING SETUP |
| 1. Wash with warm, soapy water. | UTENSIL WASHING SETUP | |
| Rinse with clear water. Sanitize with approved sanitizer (one tablespoon chlorine bleach to one gallon water). Air dry. a 3 compartment sink is not available, 3 containers big enough to accommodate the largest utensil must be provided (pictured). | wash rinse ⇒ Clean Water | Sanitize Water & Bleach espoon bleach/gal water) |
| A thermometer must be provided to take food temporal Cold foods must be held at 41° F or below. Hot foods must be held at 140° F or above. Meats must be thoroughly cooked (fish & pork = 145° If packaged foods are stored in a cooler on ice, the containers from being submerged. Refrigeration remarks are hand contact with food is not permitted. Glove Single-service disposable eating & drinking utensils All food and food equipment must be at least 6 inch Protection from adverse weather conditions (rain, we Solid and liquid waste must be disposed of in an apulation of the protection of the protection submitted on this application. | F, hamburgers = 155° F, chicken melted ice must be drained off tequired for events longer than 4 es or utensils are required. must be used. es above the ground. rind, etc) must be provided. proved manner. | = 165° F). to prevent hours. |
| Fee for LOW RISK food stand | (number of consecutive days) = \$ | is not an all |
| inclusive list. | ¢ | |
| <u>Late fee</u> (applications received less than four days prior to date of event - \$10) | | |
| Operating without a license penalty (half license fee) | \$_ | |
| Make checks payable to Redwood-Renville CHS. | TOTAL FEE SUBMITTED \$_ | |
| Mail completed application form & fee to: Redwood-Renville CHS, I | 105 S 5 th St, Room 119H, Olivia, MN . | 56277. |
| Signature: | Date: | |