



# Single Event Temporary Restaurant Application

Coos County Environmental Health  
281 LaClair St \* Coos Bay OR 97420  
541-266-6720

This application is available under "Quick Links"  
<http://www.co.coos.or.us/Departments/CoosHealthWellness/PublicHealth.aspx>

<b>Office Use Only:</b>
Date Received: _____
<input type="checkbox"/> For Profit
Fee charged: \$ _____
Receipt: # _____
<input type="checkbox"/> License Approved/ NOT <input type="checkbox"/>
By EHS _____

## Applicant Information:

<b>1. Name of Applicant</b> (Organization or Individual): Name _____ Phone # _____			
<b>2. Contact Person</b> @ serving site: Name _____ Phone# _____			
<b>3. Contact Person's email address:</b> _____			
<b>4. Mailing Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
_____	_____	_____	_____
<b>5. Person(s) in Charge (PIC) w/ Food Handler Card</b> _____			
<b>6. Preventing the #1 Cause of Food Borne Illness</b> Applicant agrees to screen staff for illness symptoms occurring within 48 hours of food event. (i.e. Fever & Sore Throat, Diarrhea, Vomiting, Exposed Lesions) _____ Initial			

## Food Event Information:

<b>7. Event Name &amp; Vicinity:</b> (name of festival/fund raiser) (name of community)	
<b>8. Serving Site</b> (i.e. address, block #, building name) _____	
<b>9. Is this a plumbed concession?</b> Y/N	
<b>10. Who has authorized you to use this location?</b> <input type="checkbox"/> Property Owner <input type="checkbox"/> Event Organizer <input type="checkbox"/> Other	
<b>11. Name of Authorizer:</b>	<b>Phone #</b>
_____	_____
<b>12. How many meals will you prepare to serve (in a day)?</b> _____	

## 13. Serving Site Info & Schedule:

Will water for use in the food booth be hauled in or is it plumbed in?  Hauled In  Plumbed In

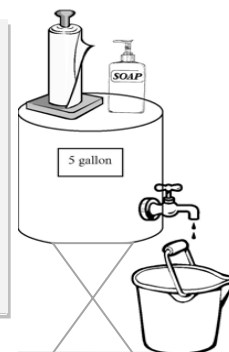
**Yes/No: Are you using water from a city water system? IF "yes", from what city?** \_\_\_\_\_

If "no," name your intended source of water \_\_\_\_\_ NOTE: Non-municipal water is subject to health department approval and also must be tested to be safe within 90 days in advance of the food event.

Date(s) of Use:	Time that Site Prep starts:	Start Time of Food Service	End Time of Food Service:	Other Prep Sites: Explain where and when any food work will occur, other than at the serving site. <b>HOME PREPARED FOODS ARE NOT ALLOWED</b> <i>except for a benevolent organization's baked goods.</i>
	am / pm	am / pm	am / pm	
	am / pm	am / pm	am / pm	
	am / pm	am / pm	am / pm	
	am / pm	am / pm	am / pm	
	am / pm	am / pm	am / pm	

14. Provide a SKETCH of the food booth, kitchen or concession & label any of the following that are included:

- \*Where Each Food Item Will Be Stored (hot & cold or dry)
- \*Where Each Food Item Will Be prepared &/or Cooked
- \*Where Food Is Ordered and Where it's Delivered to Patrons
- \*Hand Wash Station(s) →
- \*Wash-Rinse-Sanitize System
- \*Barriers Excluding Non-Food Workers



15. Food Flow Matrix: Check all categories that apply:

List all food that will be part of the menu and check the columns describing any step you'll use to process the food. (Add a page if needed).

List Foods:	Food Source (Grocery Store)	Food Preparation Steps – Check all that apply								Leftovers
		Thaw	Mix/Cut	Cook	Hot-Hold	Cold-Hold	Cool	Re-Heat	Transport	
Example: Mash potatoes	Example: Safeway			√	√					Example Discard

16. Agreement to Comply:

I have read the Temporary Restaurant Operation Guide and possess needed equipment as listed on page 16 of the Guide. I agree to comply with Oregon's Food Sanitation Rule (a violation of which is a Class C misdemeanor carrying a maximum \$1,250 fine) and will accept regulatory direction to assure the safety of food.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

**Please Note:** Submit your completed temporary restaurant application and fee far in advance of the event. Doing so helps a license to be issued in a timely way. A vendor doing food work without the license is subject to a 50% penalty in addition to the license fee. Submissions by a 'for profit' group made ≥ 10 days in advance allows for a fee reduction. **Inspectors can only collect secured payment in the field. They cannot collect cash.** Coos County **does not accept credit card** payment. Submitting paperwork early benefits "you."

**You can see Temporary Restaurant Operation Guide, The food handler training guide and the Food Safety Laws by visiting:**

<http://www.co.coos.or.us/Departments/CoosHealthWellness/PublicHealth/EnvironmentalHealth/FoodSafetyAndLicensing/TemporaryRestaurant.aspx>

**\*\* If you are a licensed Mobile Unit in the State of Oregon, you must submit a copy of your Mobile Unit Health License along with this application. If you are inspected at the event, be prepared to pay by check (pay to the order of CHW) an inspection fee of \$25.00.**

**Fee Schedule:**

**For Profit:**

Please call 541-266-6720 for current fee schedule. There is a discount if application is received or postdated 10 days or more prior to the event.

\*(If the event is on October 10<sup>th</sup>, to receive the discount the application must be received or postdated not later than September 30<sup>th</sup>)

License Fees are **non-refundable** and licenses are not transferable.

Please make checks payable to:  
**Coos Health & Wellness**

\*\*\* Fees Subject to change \*\*\*  
(Last updated: Jan 2018)