

## Polk County Environmental Health

## **Temporary Event Organizer Application**

This application must be completed and submitted to the Polk County Environmental Health to provide information about all food preparation and sales to the public at any public event or exhibition within Polk County. In addition to this organizer application, a separate **Food Vendor Application** must be submitted by each food service vendor participating in the event or exhibition. This application must be submitted with a map of the event site indicating the location of all of the food booths. Please Note:

- This application, map, and Food Vendor Application(s) must be submitted **no later than 15 days prior to the event**.
- A fee of \$75.00 will be required for each food service permit and must be paid with the submission of each Food Vendor Application.

1) Name of Event:	Date of Application/Packet Submittal:			
2) Address of Event:		NC		
3) Event Date(s):	City	State	Zip	
4) Organizer Name:	Organizer Phone:			
5) Organizer Address:				
6) Additional Organizer Contacts:	City Additional Phone:		Zip	
7) Organizer Email:				
8) Number of Anticipated Food Booths:		*How many are stating a non-profit status (ex. churches, clubs, organizations, etc.): **All non-profit groups shall provide a copy of their non-profit status from the IRS or North Carolina Department of Revenue tax exempt status designation prior to the event.		
9) Date/Time when Food Booth(s) will be ready for permitting:	groups shall provide a copy of the from the IRS or North Carolina I			
10) Source of Water for Food Booths (check the box which applies for all food vendors):				
Public Water Supplied by Organizer	$\Box$ Water Supplied by Food Ven	dor		
On-site Private Well ( <u>requires</u> testing)	□ Other:	_		
11) How and where will wastewater be disposed:				
12) How and where will waste grease and cooking oils be dispose	ed:			
13) How will garbage/trash be picked up & disposed:				
<ul> <li>14) Will electricity be supplied to the food vendors (yes or no):</li></ul>		If ye	s please	
15) Will the event include a petting zoo or pony rides?	□ No *If Yes, how many handwash si available?	nks will be	e made	
I certify that the information in this application is complete and acc be submitted to Polk County Environmental Health for review and c	urate. I understand that any changes to	o my opera	ation must	
Organizer Signature:	Date:			
Submit this application, all Food Vendor Applica				

Environmental Health at the address below