



# 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: \_\_\_\_\_  
Street City State Zip

3) Event Date(s): \_\_\_\_\_

4) Organizer Name: \_\_\_\_\_ Organizer Phone: \_\_\_\_\_

5) Organizer Address: \_\_\_\_\_  
Street City State Zip

6) Additional Organizer Contacts: \_\_\_\_\_ Additional Phone: \_\_\_\_\_

7) Organizer Email: \_\_\_\_\_

8) Number of Anticipated Food Booths: \_\_\_\_\_

9) Date/Time when Food Booth(s) will be ready for permitting: \_\_\_\_\_

10) Source of Water for Food Booths (check the box which applies for all food vendors):

- |  |  |
|--|--|
| <input type="checkbox"/> Public Water Supplied by Organizer              | <input type="checkbox"/> Water Supplied by Food Vendor |
| <input type="checkbox"/> On-site Private Well ( <u>requires</u> testing) | <input type="checkbox"/> Other: _____                  |


11) Check the following items supplied for the food booths by the organizer:

- |                                      |  |  |   |
|--------------------------------------|--|--|---|
| <input type="checkbox"/> Electricity | <input type="checkbox"/> Refrigeration   | <input type="checkbox"/> Toilet Facilities | <input type="checkbox"/> Drinking Water Hose(s) |
| <input type="checkbox"/> Recycling   | <input type="checkbox"/> Garbage Pick-up | <input type="checkbox"/> Grease Disposal   | <input type="checkbox"/> Waste Water Disposal   |

12) Will the event include a petting zoo or pony rides?  Yes \*  No

\* If "yes", how many hand wash facilities will be available? \_\_\_\_\_

*I certify that the information in this application is complete and accurate. I understand that any changes to my operation must be submitted to Polk County Environmental Health for review and approval prior to the day of the event:*

 Organizer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Submit this application, all Food Vendor Applications, permit fee(s) and event map to: Polk County Environmental Health at the address below**