



# CITY OF HARTFORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Environmental Health Division  
131 Coventry Street  
Hartford, Connecticut 06112



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## **VENDOR TEMPORARY FOOD LICENSE APPLICATION (FOR TEMPORARY FOOD EVENT)**

The VENDOR of each temporary food event must complete this application with remittance of \$75.00 (non profit events \$ 25) by **CERTIFIED CHECK, MONEY ORDER or CREDIT CARD (no cash or personal checks) payable to the City of Hartford and must be filed (15) days prior to the opening event\***. This application and \$75.00(non profit \$25) must be submitted to the Department of Health and Human Services, Environmental Health Division, 131 Coventry Street, Hartford, CT 06112.

**\*In addition applications received between 5-15 days prior to the event will be charged \$125. Applications received less than 5 days prior to the day of the event will be levied \$150. This applies to all applicants including Not-For-Profit Organizations.**

**\*This application is not a license.** Temporary food permits will not exceed a period of 1 to 5 days.

Application Date \_\_\_\_\_ Name of Event \_\_\_\_\_

Date of Event \_\_\_\_\_ Time of Event \_\_\_\_\_

Event Location \_\_\_\_\_ Building Name & Room# \_\_\_\_\_

**Event Coordinator Name (full business name)** \_\_\_\_\_

**Name of Event Coordinator Contact Person** (First) \_\_\_\_\_ (Last) \_\_\_\_\_

Phone # (work) \_\_\_\_\_ (cell) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**Name of Applicant (Food Vendor):** First name \_\_\_\_\_ Last name \_\_\_\_\_

Applicant Business Name \_\_\_\_\_ Non Profit Org. (yes) \_\_\_\_\_

If yes, submit copy of state non profit certification with the application.

Applicant's Address \_\_\_\_\_

Applicant's E-Mail Address \_\_\_\_\_

Applicant's Phone # (work & home) \_\_\_\_\_ (cell) \_\_\_\_\_

\*Name of person in charge on event premises \_\_\_\_\_ Cell # \_\_\_\_\_

Set up time \_\_\_\_\_ Inspection time \_\_\_\_\_

If person is different from applicant provide name \_\_\_\_\_



**Please provide the following information: (If any of the following does not apply to you mark it N/A)**

- 1. List all food and beverage items (menu) to be prepared and served at temporary event (attach a separate sheet if necessary).**

*PLEASE NOTE: Any changes to the menu must be submitted to the Environmental Health Division no later than 10 days prior to the event.*

Hot Food: \_\_\_\_\_  
\_\_\_\_\_

Cold Food: \_\_\_\_\_

Beverages: \_\_\_\_\_

Other: \_\_\_\_\_

- 2. Will all foods be prepared at the Temporary Food Event site?**

\_\_\_\_\_ Yes (use set-up in diagram A on page 7)

\_\_\_\_\_ No (use set-up in diagram A & B on page 7)

**If no, the operator must provide a copy of the current License for the permanent food establishment where the food will be prepared.**

- 3. Describe the food source if the food is precooked or prepared:**

a. Food Prepared at licensed kitchen or restaurant. Yes \_\_\_\_\_ No \_\_\_\_\_

b. Food ordered/purchased or donated by food establishment or organization. Yes \_\_\_\_\_ No \_\_\_\_\_

c. Food will be cooked on premises. Yes \_\_\_\_\_ Mobile Vendor Yes \_\_\_\_\_

d. Name(s) of the business \_\_\_\_\_

e. Address of the food source \_\_\_\_\_

f. License of Potentially Hazardous Food source \* attach copy of food license if issued outside of Hartford.

- 4. Describe how Potential Hazardous Food\*(PHF) will be transported from licensed kitchen to event Safely within adequate temperature range (be specific):**

Thermo vehicles: \_\_\_\_\_ Cooler with Ice: \_\_\_\_\_

Thermo box: \_\_\_\_\_ Thermo bag: \_\_\_\_\_

Other (describe): \_\_\_\_\_

- 5. Identify cooking equipment and approach, choose as may as apply:**

Gas Grill (commercial only) \_\_\_\_\_ Chaco grill (Commercial only) \_\_\_\_\_

Steamer \_\_\_\_\_ Kettle (corn) \_\_\_\_\_

Conventional Oven \_\_\_\_\_ Stove \_\_\_\_\_

Stir fry wok \_\_\_\_\_ Rice maker \_\_\_\_\_

Deep Fryer \_\_\_\_\_ Other (describe) \_\_\_\_\_

\_\_\_\_\_

6. List all places (names & address) where the food source especially meats, poultry, seafood, \*shellfish, and ice will be purchased. \*shellfish tag must be kept with the original bag or container until it is empty then kept for 90 days.

Example: Hot dog, Chili Sauce commercial packaged, Precooked -----Restaurant Depot

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**7. Describe the number, location and set up of handwashing facilities to be used by employees.**

- a. Provided by kitchen or concession facility on the premises \_\_\_\_\_
- b. Commercial Electric / Portable hand washing station \_\_\_\_\_
- c. Hand washing station set-up:

Thermo Water Tank with Spigot \_\_\_\_\_  
Waste Water Bucket \_\_\_\_\_ Soap \_\_\_\_\_ Paper Towel \_\_\_\_\_

**8. Describe how and where utensil/equipment washing will take place.**

- a. Commercial ware washing facility on event premises \_\_\_\_\_
- b. Portable three bay sink (commercial) \_\_\_\_\_
- c. Three containers of suitable size. \_\_\_\_\_
- d. Will bring back to base of operation to wash (for events less than 4 hours only) \_\_\_\_\_.
- e. Not applicable (if using single-use utensils or prepackaged food) \_\_\_\_\_.

**9. Describe how wastewater will be collected, stored and disposed.**

Collected by event coordinator \_\_\_\_\_ Bring back to base of operation \_\_\_\_\_

**10. Describe the number and location of garbage containers.**

**11. Describe what heat source will be used to keep hot foods hot (140 degrees and above).**

- a. Steamer \_\_\_\_\_
- b. Chaffing Dish \_\_\_\_\_
- c. Other (describe) \_\_\_\_\_
- d. N/A (cold food only) \_\_\_\_\_

**12. Describe how cold foods will be kept cold (45 degrees and below).**

- a. Commercial cooler/freezer \_\_\_\_\_
- b. Ice cooler \_\_\_\_\_
- c. Ice Packs \_\_\_\_\_

**13. Describe how food temperatures are monitored and thermometers cleaned, and sanitized.**

- a. Probe Type Thermometer (0-220 degrees F range) \_\_\_\_\_
- b. Cooler Thermometer \_\_\_\_\_
- c. Alcohol Swap for Sanitizing \_\_\_\_\_

**14. Personal Hygiene:**

Effective hair restraints (hat, hair net) \_\_\_\_\_

Clean outfit, apron, t-shirt with sleeves \_\_\_\_\_

Are personnel with symptoms like fever, diarrhea, vomiting, coughing/sneezing, etc. or hand/finger wounds prohibited from handling food? Yes \_\_\_\_\_ No \_\_\_\_\_

**15. List of employee/volunteer names, phone numbers, addresses, and shifts to be worked during the event.**

<u>NAME OF EMPLOYEE</u>	<u>PHONE #</u>	<u>ADDRESS</u>	<u>SHIFT</u>
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1.

2.

3.

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11.

**16. Use attachment #2 in this packet to sketch a drawing showing the event area and where your operation will be, and the layout of your equipment setting.**

**ATTACHMENT #2**

## SELF CHECKLIST FOR FOOD BOOTH/VENDOR OPERATORS

- \_\_\_\_\_ Metal probe thermometer (0 – 220 degrees F range)
- \_\_\_\_\_ Thermometers for all refrigerators
- \_\_\_\_\_ Coolers and ice packs (if ice is to be used for cooling of foods, where is water to be drained)
- \_\_\_\_\_ Equipment for PHF hot holding and transport.
- \_\_\_\_\_ Plastic wrap/Aluminum foil
- \_\_\_\_\_ Extra utensils: tongs, spatulas, spoons, and knives
- \_\_\_\_\_ Water source
- \_\_\_\_\_ Buckets/tubs for washing, rinsing, sanitizing food equipment
- \_\_\_\_\_ Bleach for sanitizing, test strips for checking
- \_\_\_\_\_ Waste water disposal container
- \_\_\_\_\_ Container(s) for grease collection
- \_\_\_\_\_ Clean wiping cloths and a container to store them in
- \_\_\_\_\_ Garbage containers and plastic bags
- \_\_\_\_\_ Hats/hair restraints and clean wear
- \_\_\_\_\_ Crates, shelves to store food off of the ground
- \_\_\_\_\_ Gloves for food handling
- \_\_\_\_\_ Hand washing station
- \_\_\_\_\_ All food containers or service item containers stored off floor

A HANDWASHING STATION MUST INCLUDE: POTABLE HOT & COLD RUNNING WATER (OR WARM WATER); LIQUID SOAP IN A DISPENSER; PAPER TOWELS; CONTAINER FOR WASTE WATER. WATER CONTAINER MUST BE CLEAN AND HAVE A VALVE OR SPIGOT THAT REMAINS OPEN TO ALLOW FOR ADEQUATE HANDWASHING.

B. Temperature:

Cold Food keep  $\leq 40^{\circ}\text{F}$   
 Hot Food keep  $\geq 140^{\circ}\text{F}$



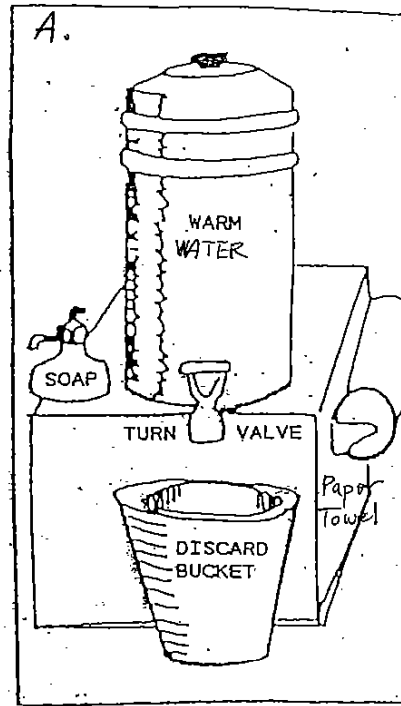
B.

Internal Cooking Temps

165°F reheats, poultry

155°F: ground meats pork

145°F: whole meats fish other PHFs



Thermometers provided.

C. MANUAL DISHWASHING PROCEDURE AT SPECIAL EVENTS

Chlorine Sanitizing Solution:  $\frac{1}{2}$  Table Spoon Bleach in Per Gallon Water.

Chlorine 100 P.P.M OR  
 Quat 200 P.P.M

