



Environmental Health Division  
 800 S. Victoria Ave., Ventura 93009-1730  
 TELEPHONE: 805-654-2813 FAX: 805-654-2480  
[vcrma.org/divisions/environmental-health](http://vcrma.org/divisions/environmental-health)  
 See Instructions/Fee Schedule on website for current fee.

FOR OFFICE USE ONLY	
Rcd By	_____
Date	_____
Amt Rcd	_____
Check #	_____
TE #	_____
FA #	_____
BO#	_____
P/E	_____
Submitted 30 days before event	_____
Verified by	_____

**TEMPORARY FOOD FACILITY TYPE 1 OPERATOR (TFF-1) APPLICATION**

FOR OPEN AND/OR POTENTIALLY HAZARDOUS FOOD, INCLUDING OPEN SAMPLING

Application must be submitted by the Event Organizer at least 30 days before the event.

Facility Name (Vendor): \_\_\_\_\_

Manager/Owner/Operator: \_\_\_\_\_ Attended TFF Class:  Y  N

Event Name: \_\_\_\_\_

Event Location: \_\_\_\_\_ Event Organizer: \_\_\_\_\_

Operating Dates/Times: \_\_\_\_\_ Time TFF will be ready for inspection: \_\_\_\_\_

TFF Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

TFF Onsite Contact(s): \_\_\_\_\_ Cell Phone(s): \_\_\_\_\_

**FEES**

Consult Instructions/Fee Schedule on Environmental Health Division (EHD) website for current fee. Attach appropriate documentation.

Number of days operating:  1  2  3  4  5  Season (Attach Schedule)  Series (Attach Schedule)  Certified Farmers' Market (CFM)  Annual

Fee Due (Subtract waiver if applicable): \$ \_\_\_\_\_

For Profit (Attach Fee)  Veteran (Attach Proof of Honorable Discharge, ie: DD214)  Non-Profit Charitable (Attach Proof)

Ventura EHD TFF Food Handler Certificate attached. \*\* TFF Certified person must be present during hours of operation. \*\*

**FOOD OPERATION TYPE**

Prepackaged PHF (Potentially Hazardous Food)  Food Preparation/Service  Prepackaged with sampling

Have you participated in a previous community event in Ventura County? Yes  No

**PART A: FOOD TO BE SOLD OR SERVED AT THE EVENT**

Food preparation shall be completed either in the temporary food facility after permit inspection or at a permitted/EHD approved food facility.

List all food offered from the TFF. Specify "prepackaged" or "open."

**FOOD PREPARATION/STORAGE AT OTHER LOCATION AND TRANSPORTATION**

All food preparation or storage must be in a permitted or EHD approved facility. Identify any facility where advance preparation (or food storage) will take place. A letter from the permit-holder must be submitted for food preparation at a permitted food facility.

Will food be prepared in advance? Yes  No  Will food be stored in advance? Yes  No

Name of Facility: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address of Facility: \_\_\_\_\_  Copy of permit attached.

Method of food temperature control used during transportation: \_\_\_\_\_

**\*\* State law prohibits the use of a private home for food preparation and/or storage. \*\***

**SAMPLING**

If handling prepackaged food, will you offer samples? Yes  No  Prepackaged samples  Open samples

Describe method of sampling

**PART B: HOT/COLD HOLDING EQUIPMENT**

Identify methods of maintaining food hot or cold during hours of operation.

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**

Cold Holding:  Mechanical Refrigerator  Ice Chest  Cold Table  N/A  
 Other: \_\_\_\_\_

**At the end of each operating day, discard or destroy all potentially hazardous food that was not held in a refrigerator holding at or below 41°F.**

Hot Holding:  Steam Table  Chafing Dishes  Soup Warmer/Crock Pot  
 N/A  Hot Holding Cabinet  Hot Dog Roller Grill  Electric Rice Cooker/Warmer  
 Other (Specify): \_\_\_\_\_

**At the end of each operating day, discard or destroy all potentially hazardous food that was held at or above 135°F.**

How will food temperatures be monitored at the event? Probe thermometer  Ambient thermometer

**PART C: EQUIPMENT/UTENSILS USED**

Will multi-use utensils (knives, scoops, spatulas, bowls, etc.) be used inside the booth for food preparation?  Y  N

**UTENSIL WASHING SINK REQUIREMENTS**

3-Compartment Utensil Washing Sink with hot (120°F) and cold running water under pressure provided by:  
 Event Organizer (skip remainder of section)  
 TFF Operator (complete information below, including sanitizer information)  
 Prepackaged food only: No 3-compartment sink required.

Provide 3-Compartment Utensil Sink Information.  
 Water tank size: \_\_\_\_\_ gallons  
 Connected to drinking water supply with backflow prevention device (provide verification of source)  
 Wastewater Tank Size: \_\_\_\_\_ gallons  
 Source of potable water: \_\_\_\_\_

Liquid Waste Removal Provided by:  TFF Operator Waste Tank Size: \_\_\_\_\_ gallons  
 Event Organizer  City of \_\_\_\_\_  Waste Removal Company

Provide Address of location where liquid waste will be disposed of:  
 \_\_\_\_\_

**SANITIZING SOLUTION**

**Provide information about the type of sanitizer to be used in 3-compartment sink and/or to sanitize surfaces.**

Sanitizer type: Chlorine  Quaternary Ammonium  Other: \_\_\_\_\_

**\*\*Ensure that appropriate test strips are available at TFF and used to test solution.\*\***

**HAND WASHING FACILITIES**

Hand Washing Facilities with minimum 5 gallons potable, warm water and 7.5 gallons waste capacity tanks provided within booth:  
 Permanent, plumbed sink  Gravity hand washing set-up  Prepackaged food only. No hand washing required.  
 Portable sink with water/waste tanks and heater for 100°F water (Required at events more than 3 days long and at CFM)

**NOTE: Gravity hand wash is not approved for Certified Farmers' Market (CFM) operation or for events lasting more than 3 days.**

**PART D: FOOD BOOTH CONSTRUCTION**

Food preparation and service booths must have 4 sides, a cleanable floor (eg: asphalt, concrete, tarp, plywood) and overhead protection. The booth may have serving windows that are no larger than 216 square inches each, separated by at least 18 inches. Prepackaged food booths require cleanable floor or grass, and overhead protection. If food booth is located on dirt, approved flooring is required. Plastic tarp is not approved flooring for TFF dispensing beverages. Food and utensils must be 6" above ground.

Floor Material: \_\_\_\_\_ Wall Material: \_\_\_\_\_  
 Ceiling Material: \_\_\_\_\_ Size of Pass-through Windows: \_\_\_\_\_

**TEMPORARY FOOD FACILITY TYPE:**  Food Booth (Tent)  Beverage Truck  Permanent Structure (eg: Snackbar)

**PART E: CERTIFICATION**

I have completed the application to the best of my ability. I understand that I may be asked to provide additional information in

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order for the application to be approved and that the information provided is considered part of the application.

I understand that failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of permit, and/or citation.


I understand that once the application is submitted the application fee is non-refundable. I also understand that if I submit the application with a missing or expired TFF training certificate OR if the TFF certified person is not present during hours of operation, no fee waiver will be given and full fee is due.





Application completed by:

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Telephone: \_\_\_\_\_

**PART F: SKETCH OF BOOTH LAYOUT**

**Include location of cooking equipment, hand washing facilities, food and utensil/equipment storage, utensil washing facilities, outside condiment storage and open-air BBQ (if applicable), and trash.**



Example Legend	
	Gravity hand washing
	Hand washing sink
	3-compartment sink
	Trash

Be sure to identify each item you draw.

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