



COUNTY OF LAKE
HEALTH SERVICES DEPARTMENT
Division of Environmental Health
922 Bevins Court, Lakeport 95453-9739
Telephone 707/ 263-1164 Fax: 707/ 263-1681

Jim Brown
Health Services Director

Raymond Ruminski, R.E.H.S
Environmental Health Director

TO: Community Event Sponsors in Lake County of Lake

RE: Community events involving selling food to the public.

Section 114381.1 of the **California Health and Safety Code (CHSC)** requires that two weeks prior to any community event the sponsoring organization needs to obtain an event permit. To ensure that any food served to the public is in safe and wholesome condition, we are providing you a copy of the "Food Safety at Temporary Events brochure". At our inspections we focus on risk factors that could lead to an outbreak of a food borne illness. These include safe food temperatures, proper hand washing, prevention of contamination, and approved food sources. We consider this a very important event for our community and dedicate our health inspectors and support personnel to conduct the inspections, permit the facilities, and follow-up on food safety issues.

Please complete the enclosed Sponsor's permit and list of vendors for the event, so you can fulfill the following responsibilities as the sponsor:

- 1) The event organizer needs to **submit a list of food vendors** and the type of food to be served. This includes any and all pre-packaged food and drinks. (Form enclosed).
- 2) Also provide a **Site Plan** which shows the **proposed locations of each temporary food facility, restrooms, and all shared utensil washing, hand washing and janitorial facilities**. An adequate supply of pressurized potable **hot (120°) and cold running** water, shall be provided for all shared utensil washing, handwashing (**warm water at 100°F**), and janitorial purposes facilities. Approved restrooms must be provided within 200 feet for the food vendors with handwashing sinks supplied with warm water, handwash cleanser, and single-use sanitary towels. Refuse containers for solid waste disposal and approved liquid waste disposal facilities must be provided.
- 3) In addition, please ask **each food vendor** to complete a temporary food permit (enclosed). They can submit it via fax (263-1681), mail (922 Bevins Ct., Lakeport, CA 95453) or personally delivered to the same address. **The individual food vendor permits must be completed and submitted at least 7 days prior to the event to give Environmental Health time to review the permits and resolve any compliance issues.**

Thank you for your cooperation. Please call our office at 707-263-1164 if you have any questions.

SPONSOR



Environmental Health Division
922 Bevins Court, Lakeport
Ph (707) 263-1164 FAX (707) 263-1681

Jim Brown
Health Services Dept. Director
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Environmental Health Div. Director

COUNTY OF LAKE TEMPORARY HEALTH PERMIT

EVENT NAME: _____

EVENT DATE & TIME: _____

EVENT LOCATION: _____

BUSINESS OR ORGANIZATION NAME: _____

OWNER OR AUTHORIZED REP.: _____

PHONE #: _____ FAX: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

NAME OF ON-SITE COORDINATOR & HOW INDIVIDUAL CAN BE CONTACTED AT EVENT:

DATE & TIME THAT FOOD SERVICE OPERATIONS WILL BE SETUP: _____

DESCRIBE TOILET & HANDWASHING FACILITIES (TYPE, NUMBER, AND LOCATION): _____

HOW WILL AN ADEQUATE SUPPLY OF ELECTRICITY BE PROVIDED TO THE TFE SITES? _____

DESCRIBE POTABLE WATER SUPPLY: _____

DESCRIBE WASTEWATER DISPOSAL SYSTEM: _____

DESCRIBE GARBAGE DISPOSAL: _____

SHOULD A PERMIT BE GRANTED, I UNDERSTAND AND WILL ABIDE BY THE PERTINENT STATUTES AND REGULATIONS. I ALSO AGREE THAT HEALTH DEPARTMENT REPRESENTATIVES MAY MAKE INSPECTIONS AND EXAMINE RECORDS DURING OPERATING HOURS.

Signature _____ DATE: _____

Permit issued by: _____, R.E.H.S. DATE: _____

SPONSOR

Sponsor's Operational Plan

SITE PLAN

