



St. Joseph County Health Department

Temporary Event Plan and Review

IMPORTANT: The temporary Plan and Review **MUST** be submitted to the Health Department

30 days prior to the Event. The application must be completed in its entirety.

Event Name: _____

Date of Event: _____ 20____ Operational Hours of Event: _____

Location of the Event: _____

Event Coordinator's Name: _____

Business Address: _____ Phone Number: _____

E-mail: _____ Fax number: _____

Set up Date: _____ 20____ Time: _____

Water Supply: Public _____ Private _____ (copy of last water test) Y N

Sewage Disposal direct hook up _____ Holding Tank: _____

Total Number of Temporary Food Vendors: _____

Approximate Number of people expected to attend the event daily: _____

Event Coordinator Responsibility:

- Ensure all vendors have **applied for and obtained the necessary permit(s) seven (7) days before the Event.**
- Contact the temporary vendors and inform them of the inspection time.
- Inform the vendors they need to be at their location until the Health Department has conducted an inspection.
Vendors who are not at their location or not in full compliance with 410 IAC 7-24 will not be allowed to operate.
- If a vendor has not applied and paid for a permit, the Event Coordinator **SHALL** not allow that vendor to operate.
- Any vendor without adequate hand washing facilities will be closed until adequate hand washing facilities can be provided.
- Submit a site map listing location(s) of the food vendors.

The Temporary Event Plan and Review may be faxed to the Health Department at 574-235-9497, mailed to St. Joseph County Health Department, Attention Food Division, 227 W. Jefferson Blvd. 9th Floor County City Building, South Bend, IN 46601, or emailed to rhooton @ co.st-joseph.in.us If there are any questions contact our office at 574-235-9721.

Office Use Only

Date application received: _____

Staff Initials: _____

	<i>Vendor Name</i>	<i>Contact Person</i>	<i>Cell Phone</i>	<i>Telephone</i>	<i>No. of Units</i>
1					
2					
3					
4					
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6					
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