TEMPORARY FOOD OPERATION







1/2/2024

Hancock Public Health

TEMPORARY FOOD OPERATION REQUIREMENTS

Obtaining a Temporary Food Operation License

A temporary food operation license must be obtained for any event where foods are being prepared or served for a charge or required donation.

A temporary event is an event that operates over a period of 5 days or less. If an event spans a period longer than 5 days, a separate license must be obtained for each 5-day period.

Only 10 temporary licenses are permitted to be taken out by one person or group per year.

To obtain a temporary food operation license, the attached application must be completed and submitted with the fee listed below to the Hancock County Health Department at least ten (10) days prior to the planned event.

TEMPORARY FOOD OPERATION FEE



The application outlines information that is necessary for obtaining the license Listed below is a listing of some of the information necessary for completing the application.

- A diagram of the layout of the temporary location
- A list of foods served. The source for each food must also be listed.
- Equipment used to keep foods hot and cold.
- Water source and how hot water will be provided.
- Setups used for dishwashing and handwashing.





PREPARATION





All foods MUST be prepared at the licensed temporary location or in a licensed food operation.

Foods **CANNOT** be prepared in the home and transported to the site.





Home-canned foods CANNOT be used as ingredients in foods or sold at the temporary location.

HOT HOLDING

Hot foods must be held at 135° higher at all times. The following items may be used for hot holding of foods.







COLD HOLDING

41 or colder at all times. The following items Cold foods must be held at may be used for cold holding of foods.

Ice chests must have a sufficient amount of ice to keep all parts of the food at 41°F or less.

Store raw meats separate from ready to eat foods to prevent cross contamination.



THERMOMETER

A proper thermometer (dial, digital, etc.) must be provided for checking cooking, hot holding, cold holding, and storage temperatures. Any thermometer used must contain a range of 0° - 220° F.









Mop Sink

Toilet

Watertight Containers

GARBAGE DISPOSAL

All garbage and refuse must be stored in cleanable containers with tight-fitting lids. Garbage and refuse are not permitted to accumulate on the ground. These measures are to aid in the control of insects and rodents.

Outdoor Events

The food prep area and food storage should be protected from the elements by a roof or covering. The local fire department should be consulted regarding cooking under any covering or roof.



The flooring of the area needs to be either concrete, asphalt, or non-absorbent, cleanable mats to control dust and mud.

Person-In-Charge

A Person-In-Charge must be present at the Temporary Food Service at all times with knowledge of proper and safe food handling practices.

Food Employee Health

If a food employee is ill or a family member has been diagnosed with a food-borne illness then they are not allowed to handle food.

The Person-In-Charge is responsible in making sure ALL employees read and sign the Temporary Food Employee Health Policy. The completed form must be kept at the licensed location for review during the inspection.



HANCOCK PUBLIC HEALTH TEMPORARY FOOD SERVICE/FOOD ESTABLISHMENT

| | | Today's Date: |
|-----------------------------|---------|---------------------------------|
| Name of Event: | | Name of Applicant: |
| Event Indoor | Outdoor | Applicant Address: |
| Event Location: | | |
| | | Telephone #: |
| Date(s) Food Is To Be Sold: | | Time Food Ready For Inspection: |
| Serving Time: | | |

A Person-In-Charge must be present at the Temporary Food Service at all times with knowledge of proper and safe food handling practices and making sure all food handlers have read and signed the Temporary Food Employee Health Policy. Please list the name(s) of the person-in-charge if different than the license holder.

□ Same as License Holder

ALL FOOD MUST BE PREPARED ON SITE (NOT AT HOME) OR IN A LICENSED FOOD SERVICE OPERATION.

Prepared on Premises:_____

Prepared in a Licensed Kitchen: ______ Location of Kitchen: ______

COMPLETE LISTING OF EVERY FOOD OFFERED FOR SALE (INCLUDING LIQUID REFRESHMENTS) ALL FOOD TO BE FROM AN APPROVED, LICENSED SOURCE

| FOOD ITEM | WHERE PURCHASED? | FOOD ITEM | WHERE PURCHASED? |
|-----------|------------------|-----------|------------------|
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PROVIDE AND USE A METAL STEM-TYPE PRODUCT THERMOMETER 0° TO 220°F.

TIME/TEMPERATURE CONTROL FOR SAFETY FOODS (TCS) MUST BE HELD AT 41°F OR BELOW OR AT 135°F OR ABOVE; THERFORE:

| CHECK HOW ALL HOT FOODS | WILL BE KEPT AT 135°F OR AB | OVE: | |
|------------------------------|-------------------------------|------------------|--|
| Cooked to Order | Hot Boxes | Held on Grill | |
| Steam Tables | Electric roaster | Crock Pots | |
| Other (Explain): | | | |
| | | | |
| CHECK HOW ALL COLD FOOD | S WILL BE KEPT AT 41°F OR BEL | .OW: | |
| Electric Refrigeration Units | | Other (Explain): | |
| Iced Coolers | | | |

| CHECK HOW AN ADEQUATE SU Hot Water Heater | JPPLY OF HOT WATER WILL BE SU Coffee Pot | JPPLIED: Thermos | Heated on Stove |
|---|--|--|--------------------------------|
| Hand sink | SHING FACILITY THAT WILL BE US Container with spigot/hc D TOWELS MUST BE PROVIDED!!! | ot water/bucket to cate | h water |
| CHECK HOW UTENSILS WILL BE Three-Compartment Sin | E WASHED, RINSED, AND SANITIZ k | | al Pans/Buckets/Tubs |
| | SANITIZER STRENGTH: for Plain Chlorine Bleach pers are for QuatAmmonia Liquid | l and Sanitabs | |
| CHECK HOW ALL FOOD WILL B Locate All Food Away fro Covered with Saran Wra | | L SNEEZING, COUGHIN Sneeze Guard Overhead Tarp | |
| CHECK HOW ALL EATING UTEN Individually Wrapped | ISILS ARE TO BE STORED: | In Sanitized Col | ntainers With Handles Up |
| CHECK HOW ALL WASTE ITEMS Picked up by Organizatio Removed and Properly D | | D FROM THE SITE: Covered Trash | Cans/Bags |
| CHECK HOW ALL RAW FOOD P SITE PRIOR TO THE EVENT: | RODUCTS OR COMMERCIALLY PF | REPARED FOODS WILL | BE TRANSPORTED TO THE SERVING |
| Refrigerated Truck | Iced Coolers | Hot Boxes | Other |
| EVERYONE IN THE TEMPORARY RESTRAINTS WILL BE USED. | Y STAND MUST HAVE HIS/HER HA | AIR COMPLETELY RESTR | AINED. CHECK WHICH TYPE OF |
| Baseball hats | Hair Nets | Visors | |
| NO BARE HAND CONTACT IS TO ELIMINATED: | O BE MADE WITH READY TO EAT | FOODS. HOW WILL BA | ARE HAND CONTACT BE |
| | Tongs, Spoons, Utensils | Other(Explain): | |
| TEMPORARY FOOD STANDS M. BE SETTING UP ON: | AY NOT SET UP ON GRASS, DIRT | OR GRAVEL. CHECK WH | HAT TYPE OF FLOORING YOU WILL |
| Asphalt(Parking Lot) | Concrete | Plywood | Other |
| Draw a Diagram of food | preparation/service areas (hand | wash, sinks, cooking e | equipment, serving area, etc.) |
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TEMPORARY FOOD EMPLOYEE HEALTH POLICY

PURPOSE

The purpose of the Food Employee Illness Reporting Policy is to ensure that all food workers notify the "person-incharge" (PIC) when you experience any of the conditions listed so that appropriate steps are taken to preclude transmission of foodborne illness or communicable diseases.

POLICY

All food workers shall report if they are experiencing any of the following symptoms to the PIC:

| A Diarrhea | |
|--|--|
| ☆ Fever [Especially if accompanied by Sore Throat] | |
| ☆ Vomiting | |
| ☆ Jaundice | |
| ☆ Infected Cuts, Boils or Lesions [regardless of size] containing pus on fingers, hands or any exposed body part | |
| Any acute Gastrointestinal Symptoms | |

Food employees should also notify their PIC whenever diagnosed by a healthcare provider as being ill with any of the following diseases that can be transmitted through food or person-to-person by casual contact:

Campylobacter

Cryptosporidium

Cyclospora

Entamoeba Histolytica

Escherichia Coli 0157:H7

> Salmonella Typhi
 > Shigella
 > Vibrio Cholerae

Yersinia

Salmonella spp.

➤ Norovirus

- Giardia
- Hepatitis A

In addition to the above conditions, food employees shall notify their PIC if they have been exposed to the following high-risk conditions:

- Exposure to or suspicion of causing any confirmed outbreak involving the above illnesses.
- A member of their household is diagnosed with any of the above illnesses.

• A member of their household is attending or working in a setting that is experiencing a confirmed outbreak of the above illnesses.

FOOD EMPLOYEE RESPONSIBILITY

All food workers shall follow the reporting requirements specified above involving symptoms, diagnosis and high-risk conditions specified. All food workers subject to the required work restrictions or exclusions that are imposed upon them as specified in Ohio law, the regulatory authority or PIC, shall comply with these requirements as well as follow good hygienic practices at all times.

PIC [PERSON-IN-CHARGE] RESPONSIBILITY

The PIC shall take appropriate action as specified in the Ohio Uniform Food Safety Code 3717-1-02.1 (D) to exclude, restrict and/or monitor food employees who have reported any of the aforementioned conditions.

The PIC must exclude employees from the food operation until diarrhea or other symptoms have ceased and 2 consecutive stool samples are negative for the following **(exceptions are noted in brackets for specific agents)**:

- Salmonella spp.
- Shigella
- Escherichia Coli 0157:H7
- Campylobacter
- 🕸 Vibrio Cholera
- Cryptosporidium [3 Negative Stool Samples]
- Giardia [3 Negative Stool Samples]
- 🏶 Yersinia
- Hepatitis A [10 days after initial symptoms]
- Cyclospora [After diarrhea has ceased and antimicrobial therapy has commenced]

The PIC shall ensure these actions are followed and only release the ill food worker once evidence, as specified in the food code, is presented demonstrating the person is free of the disease causing agent or the condition has otherwise resolved.

The PIC shall cooperate with the regulatory authority during all aspects of an outbreak investigation and adhere to all recommendations provided to stop the outbreak from continuing. The PIC will ensure that all food workers review the questionnaire and sign the form acknowledging their awareness of this policy.

| Food Workers Signature: | Date: |
|-------------------------|-------|
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| Person-In-Charge Signature: | Date: |
|-----------------------------|-------|

2024 Application for a License to Conduct a Temporary: (check only one)

Instructions:

1. Complete the applicable section. (Make any corrections if necessary.)

□ Food Service Operation

□ Retail Food Establishment

- 2. Sign and date the application.
- 3. Make a check or money order payable to: Hancock Public Health
- 4. Return check and signed application to:

Hancock Public Health 2225 Keith Parkway Findlay, Ohio 45840

Before license application can be processed the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in not issuing a license. This action is governed by Chapter 3717 of the Ohio Revised Code.

| Name of temporary food facility | y | | |
|----------------------------------|----------|-------------------|--------------|
| Location of event | | | |
| Address of event | | | |
| City | | State | ZIP |
| Start date | End date | Operation time(s) | 1 |
| Name of license holder | | | Phone number |
| Address of license holder | | | |
| City | | State | ZIP |
| List all foods being served/sold | | | · |
| | | | |
| | | | |

I hereby certify that I am the license holder, or the authorized representative, of the temporary food service operation or temporary retail food establishment indicated above:

 Signature
 Date

Licensor to complete below

| Valid date(s) | License fee: |
|---------------|-----------------|
| | \$50.00 per day |

Application approved for license as required by Chapter 3717 of the Ohio Revised Code.

| Ву | Date |
|-----------|-------------|
| Audit no. | License no. |