

# APPLICATION FOR A TEMPORARY RESTAURANT PERMIT

## Central Shenandoah Health District Offices:

Bath County: 839-7246

Harrisonburg/Rockingham Co.: 574-5200

Highland County: 468-2270

Lexington/Rockbridge: 463-3185, extension-5

Staunton/Augusta County: 332-7830, extension 5

Waynesboro: 949-0137, extension 6 or 130

### For Office Use ONLY

Date received by Local Health Dept. \_\_\_\_\_

Application entered into VENIS (date/initials): \_\_\_\_\_ EHS assigned \_\_\_\_\_

Permitted:  yes  no Permit Issue (date): \_\_\_\_\_ Inspection Entered in VENIS (date): \_\_\_\_\_

**Directions: Please complete all information. Failure to provide complete and/or submit information may result in delay of processing or rejection of your application.**

Please print or type. Include a copy of previous payment receipt(s) if you have paid this year. If you hold a Virginia Mobile Unit Permit issued by another Health District please include a copy.

Application Date: \_\_\_\_\_ Name of Group or Individual: \_\_\_\_\_

Address of Group or Individual: \_\_\_\_\_

Organization Representative(s): \_\_\_\_\_ Representative e-mail: \_\_\_\_\_

Representative(s) telephone numbers Work: \_\_\_\_\_ Home: \_\_\_\_\_ Cell: \_\_\_\_\_

EVENT DATE(S): \_\_\_\_\_ TIME(S) \_\_\_\_\_ to \_\_\_\_\_ EVENT \_\_\_\_\_

Event Location: ADDRESS (Number and Road) \_\_\_\_\_

FOOD FACILITY TYPE (Booth, Canopy, Trailer, Permitted Mobile Unit, etc.) \_\_\_\_\_

Please provide specific information about sources. For "Public" sources (provided by a city, county or other municipality) list: "Public - (name of municipality)". Well or spring water may **not** be used.

Water Source \_\_\_\_\_ Liquid Waste (gray water) Disposal \_\_\_\_\_

Solid Waste Disposal \_\_\_\_\_ Sewage Disposal (if provided) \_\_\_\_\_

### List Foods and Beverages (excluding individual prepackaged items, bottled water, and soft drinks).

Foods and Beverages	Sources	Preparation Location	Methods used for: (1) Cold Holding, (2) Preparing, (3) Cooking, (4) Hot Holding, and (5) Serving. Please include equipment used.
<i>Example: Hot Dogs</i>	<i>Supermarket (name)</i>	<i>Al's Deli or on site</i>	<i>Stored partially frozen in cooler. Boiled in large pot on gas grill. Hot held in water in crock pot. Served with tongs. Buns handled with gloved hands.</i>

FOOD/ BEVERAGE	SOURCE & ADDRESS	WHERE PREPARED	METHODS USED
If you have additional foods, please list them on a new sheet of paper.			

### Handwash Station, Warewash Station, Utensils, Hot/ Cold Holding and Equipment

Handwashing supplies	How will condiment be served?	How will utensils and equipment be cleaned and sanitized?	Methods for cold holding Potentially Hazardous Foods	Cooking and Hot Holding Equipment
<i>Ex: Jug with <b>free flow spigot</b>, soap, paper towels, and catch bucket below</i>	<i>Ex: Individual packets, squirt bottles, or by food handlers. Prohibit customers from using open containers</i>	<i>Ex: Wash, rinse, sanitize (50-100ppm chlorine) , air dry</i>	<i>Ex: Cooler with ice, Refrigerator powered by generator, etc. Cold hold at 41°F or colder</i>	<i>Ex: Crock pot, electric grill, steam table, etc.</i>

You may call the local Health Department prior to the event to verify the status of your. **Please notify the local office in advance of the event if there are any changes made after submission of your application, such as addition of other foods or changes in time, day, or location of operation.**

### CERTIFICATION

I have read the attached instructions, understand them, and will comply with their requirements, including payment of applicable fees. I understand that failure to comply may result in a permit not being issued or permit suspension, as per 12 VAC 5-421 Board of Health Food Regulations, effective December 2008, and as may be amended.

\_\_\_\_\_  
Operator signature

\_\_\_\_\_  
Date