



TEMPORARY FOOD SERVICE INFORMATION

Please refer to this sheet when completing your application and retain it for future reference.

For temporary food service, your primary concerns are to:

- Obtain all food from an approved source, such as a grocery store.
- Keep perishable food cold ($\leq 4^{\circ}\text{C}$), frozen ($\leq -18^{\circ}\text{C}$), or hot ($\geq 60^{\circ}\text{C}$) until use.
- Ensure all utensils, containers, and work surfaces are regularly cleaned and sanitized.
- Ensure that sanitizer solution and appropriate test strips are readily available and in use.
- Wash your hands often with warm water, liquid soap, and paper towels. Never handle food when ill.
- Keep raw foods, especially eggs, meat and fish, separate from cooked foods.
- Cook and reheat foods to $\geq 74^{\circ}\text{C}$.
- Where food samples are offered, use single service dispensing or limit sample distribution to food handlers.
- Ensure food handling duties are performed separately from cash handling duties.

FOOD SAFETY AND SANITATION PLANS:

For single day events with simple preparation and lower risk foods, your Operational Plan on the attached application may also serve as your Food Safety and Sanitation Plan. For multi-day events and those with more complicated menus and/or higher risk foods, separate Food Safety and Sanitation Plans are required in addition to the application. Plan templates and instructions are available at <https://www.islandhealth.ca/learn-about-health/food-safety/food-safety>.

HAND WASHING:

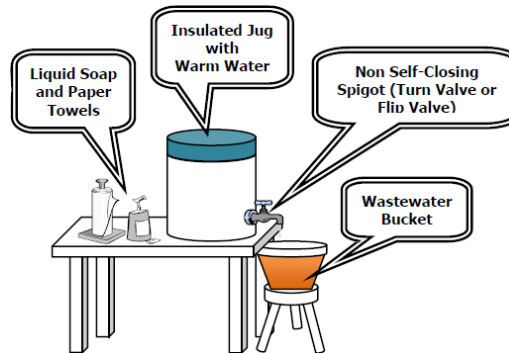
- Wash hands before starting work, after using the toilet and whenever contamination may have occurred.
- Provide liquid soap and paper towel, and ensure an adequate amount of potable water is available at all times.
- Dispose of wastewater into a sewer connection (via toilet or laundry sink) or appropriate sewerage system.

PORTABLE HAND SINK EXAMPLE



Large or multiday events and those with higher risk foods generally require portable hand wash sinks with supply and wastewater tanks or connections.

TEMPORARY HAND WASH STATION EXAMPLE:



Temporary hand wash stations are suitable for shorter, lower risk events only. [Contact an EHO](#) if you are unsure whether more is required for your event.

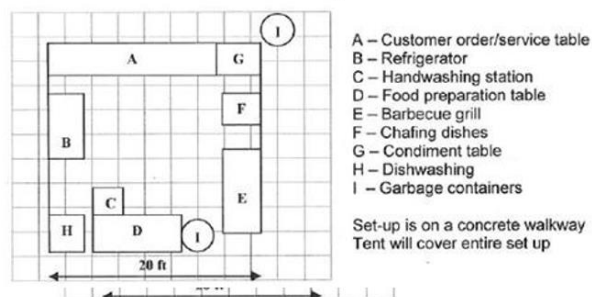
SCALE DRAWING OF LAYOUT:

The application requires a detailed scale drawing of how you will set up your temporary food service.

Be sure to include:

- All equipment for food storage & preparation (counters, fridges, freezers, hot holding, BBQs etc.)
- Storage of utensils and single service items.
- Location of hand washing stations(s)
- Location of dish washing station(s)
- Wastewater and garbage collection
- Flooring & overhead cover (e.g. tent)

SCALE DRAWING EXAMPLE:



VENDOR NAME:	DATE OF EVENT:
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OPERATIONAL PLAN <i>(*Also serves as Food Safety Plan for 1 day events with a limited menu and minimal preparation*)</i>		
	REQUIREMENT	SPECIFY <u>HOW</u> THIS WILL BE ACCOMPLISHED, LIST EQUIPMENT USED
General Food Protection	Protected from contamination (off ground, covered)	
Temperature Monitoring	Record temp before/after transport and every 2 hours <i>(use accurate probe thermometer)</i>	
Cooking and Reheating	To required internal temperature (e.g., Chicken and all reheated foods to 74°C)	
Hot-holding	Hold hot food at 60°C or hotter	
Cold-holding	4°C or colder-Mechanical refrigeration generally required	
Food Contact Surfaces	Smooth, non-porous and easily cleanable (e.g., stainless steel)	
Hand Washing	Warm water dispensed from non-self-closing valve. Soap in a dispenser and paper towels	
Sanitizer	Approved sanitizer (e.g. 1 teaspoon bleach/ litre water), use test strips	
Water Supply	From an approved water supply system via potable water hoses	
Ware Washing	3 sinks for onsite food prep	
Wastewater Disposal	Into sanitary sewer (not ground surface/storm drain)	

FOODSAFE CERTIFIED FOOD HANDLERS: <i>**1 certified person required at all times- attach copies of certificates**</i>	
NAME:	PHONE NUMBER:
NAME:	PHONE NUMBER:
NAME:	PHONE NUMBER:
NAME:	PHONE NUMBER:

IF APPROVED, HOW WOULD YOU LIKE TO RECEIVE YOUR PERMIT?
<input type="checkbox"/> Pick up in HPES office <input type="checkbox"/> Fax to: _____ <input type="checkbox"/> Mail <input type="checkbox"/> Email

