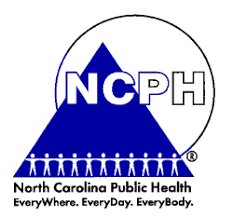
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**DUPLIN COUNTY**

Health Services\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

340 Seminary Street

PO Box 626

Kenansville, NC 28349

Main Office 910-296-2130

Environmental Health 910-296-2126

FAX 910-296-0250

***TEMPORARY FOOD SERVICE PERMIT***

***Supplemental Documents & Other Information***

*The following pages are for your reference* ***ONLY****.*

***DO NOT*** *submit with your application.*

*The employee health policy agreement and addendum must be available at your booth during the duration of the event.*

*You may find additional copies of this application and supplemental documents at:*

[*https://www.duplincountync.com/food-lodging/*](https://www.duplincountync.com/food-lodging/)

**Rules Regarding Temporary Food Establishments**

**Food Protection**

1. All foods must be obtained from approved sources. Hamburgers, hot dogs, sausages, etc., must be obtained from an approved/permitted commercial source, in its final form, ready-to-cook.
2. Once food is received by a vendor, the food must be kept protected from any type of contamination. These foods must be maintained hot (above 135°F) or cold (below 41°F) at all times. This includes during transportation to the site, and before and/or after cooking. Participants must have refrigeration and heating equipment capable of maintaining these temperatures. Foods which require heating, must be heated rapidly to 165°F, and maintained at 135°F.
3. All food handling/cooking operations and areas must be covered overhead with at least a tent like roof. Effective measures such as fans, screens, walls or a combination thereof, shall be provided to keep dust, insects, rodents, animals and other sources of potential contamination out of the establishment. Tent sides or tarps need to be provided in case of inclement weather. At no time is any item of food to be placed on the ground.

**Personal Hygiene**

1. Participants must wear clean clothing, aprons and hair restraints.
2. No person who has a contagious or infectious disease, wound or boil will be allowed to work in a food booth.
3. Persons involved in food sales, handling money and customer contact duties should not be involved in food preparation unless they first wash their hands.

1. Proper hand washing must be completed after smoking, eating, visiting toilet facilities, sneezing, etc. before returning to food preparation.

1. No smoking will be allowed inside food booths.

1. No bare hand contact is allowed with ready-to-eat foods. Suitable utensils such as deli tissue, spatulas, tongs, single-use gloves or dispensing equipment shall be used.

1. A handwashing set-up is required to include at least a 2-gallon container, warm water, soap, paper towels and wastewater catch basin.
2. Employees working with food shall keep fingernails trimmed, filed and maintained. Unless wearing intact gloves in good repair, a food employee may not wear fingernail polish or artificial fingernails when working with exposed food. Except for a plain rin such as a wedding band, food employees may not wear jewelry including medical information jewelry, watches, etc. on their hands or wrists.

**Clean-Up**

1. All utensils, warmers, griddles, etc. must be cleaned routinely, sanitized as require and maintained in a sanitary manner.

1. Participants will need to bring sufficient numbers of clean cooking utensils so that soiled utensils can be replaced with clean utensils as needed during the day.

1. Utensil washing station shall consist of at least three basins of sufficient size to submerge, wash, rinse and sanitize utensils. At least one drain board, table or counter space shall be provided for air-drying.

1. A separate food preparation sink must be provided if produce is to be washed.
2. NO DUMPING of liquid waste or grease into storm drains or onto the ground. The organizer or sponsor will provide dumpsters and grease receptacles for the disposal of these products.
3. General cleaning must be maintained in all booths. This includes the premises (grounds) surrounding your establishment. All garbage and refuse shall be removed at least daily and disposed of in a sanitary manner.

1. Utensils and food prep surfaces must be washed, rinsed and sanitized (Sanitizing solution that can be used include Chlorine 50ppm, QUAT 200ppm or Iodine 12.5ppm).

**Temporary Food Establishment Checklist**

1. The vendor has the responsibility of verifying with the organizer or sponsor the availability of water and electrical hookups as well as wastewater, garbage and grease disposal at each site for food vendors. A food grade potable water hose is required for water connections. No disposing of grease or wastewater into storm drains. Contact the organizer or sponsor for these items.
2. All food must be obtained from approved sources. Any foods requiring preparation prior to the event must be prepared in a kitchen that has been approved by Duplin County Environmental Health. **DO NOT PREP FOOD BEFORE RECEIVING A PERMIT**; you will be asked to DISCARD any food prepared prior to receiving a permit.
3. The following checklist is provided for your use. All items must be completed in order to receive a permit:

\_\_\_\_\_\_Submit Temporary Food Service application & pay $75.00 permit fee no later than fifteen (15) days prior to event

\_\_\_\_\_\_Sanitizer Solution

\_\_\_\_\_\_Sanitizer Test strips

\_\_\_\_\_\_Metal stem food thermometer (0-220°F)

\_\_\_\_\_\_Water under pressure. Way of heating water. Handwashing water must be warm (100°F) & utensil washing water

must be 110°F.

\_\_\_\_\_\_Utensil washing set up – 3 basins of sufficient size to submerge, wash, rinse and sanitize utensils. At least one

drain board, table or counter space shall be provided for air-drying.

\_\_\_\_\_\_Handwashing set-up – 2 gallon container with an unassisted free flowing faucet, soap, single-use paper towels &

wastewater receptacle. Warm water (100°F) must be used.

\_\_\_\_\_\_Hair restraints

\_\_\_\_\_\_Gloves

\_\_\_\_\_\_Separate food preparation sink for washing produce, if needed.

\_\_\_\_\_\_Adequate & approved supply of ice. Ice scoops & a separate bin for consumption ice.

\_\_\_\_\_\_Food stored off the floor/ground (potatoes, onions, cooler/boxes of food must be stored on a pallet or other

approved means).

\_\_\_\_\_\_All food handling & cooking musts be done in a protected area. This area shall have overhead coverage. Effective

measures such as fans, screens, walls for protection from dust, insects, inclement weather, etc. Ground cover must

also be provided if booth is not on concrete/asphalt.

\_\_\_\_\_\_Open displays must be protected from contaminated by sneeze guards or other barriers.

\_\_\_\_\_\_Dispensers for condiments (i.e. prepackaged, squeeze bottles, self-closing hinged lid containers)

**If you have questions, you may contact Duplin County Environmental Health at (910)296-2126.**

**\*\*You should make a copy of your entire application (for your use) prior to submission\*\***

**Work Schedules**

In order to effective serve your patrons, your food event must be managed & staffed in an organized manner. The event chairperson must consider all of the jobs that need to be done – from cleaning before the event to garbage pick-up after the event is over. When these responsibilities are identified, volunteers should be assigned duties & scheduled to work. If necessary, subcommittees may be organized to accomplish certain tasks.

It is important to keep accurate records of all volunteers’ work schedules. If there is a foodborne illness outbreak or other food safety incident, the Health Department will require this information during their investigation. An employee health policy (provided within this document) is required for all employees.

**NOTE: Keep on file for at least 60 days after the event.**

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| **NAME** | **DATE** | **ASSIGNMENT** | **TIME**  **IN** | **TIME**  **OUT** |
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**Temporary Food Establishment Dishwashing Procedure**

Prepare dishwashing set-up

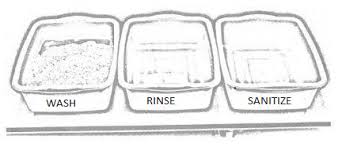
1. Prepare three compartment basins for dishwashing set-up.
2. Obtain water from approved source provided by event facilities or by using hermetically sealed water obtained from an approved source (i.e. bottled water)
3. Fill 1st basin with water heated to at least 110°F & dish detergent.
4. Fill 2nd basin with cool/lukewarm water for rinsing dishes.
5. Fill 3rd basin with coo/lukewarm sanitizing solution.

Proper mixing of chlorine sanitizing solution:

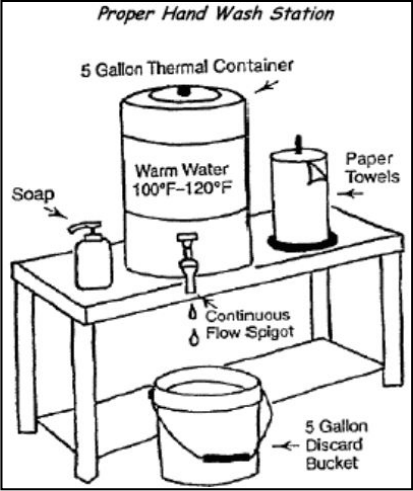
Chlorine 50ppm sanitizing solution = 1 Tablespoon regular bleach + 1 gallon water

Dishwashing procedure:

1. Wash dishes/utensils in hot, soapy water in 1st pan.
2. Rinse dishes/utensils thoroughly in 2nd pan.
3. Sanitize dishes/utensils in 3rd pan for at least 30 seconds.
4. Allow dishes to air-dry completely on a clean surface. DO NOT towel dry dishes.



**Proper Hand Washing Station**



**Warm Water**

**(at least 110°F)**

**5-Gallon**

**Wastewater**

**Receptacle**

**Continuous Flow**

**Spigot**

**Soap**

**Soap**

**Paper**

**Towels**

**2-Gallon Thermal Container**

**Employee Health Policy Agreement**

**Reporting: Symptoms of Illness**

I agree to report to the manager when I have:

1. Diarrhea
2. Vomiting
3. Jaundice (yellowing of the skin and/or eyes)
4. Sore throat with fever
5. Infected cuts, wounds or lesions containing pus on the hand, wrist & exposed body parts (such as boils and infected wounds, however small).

**Reporting: Diagnosed Illnesses**

I agree to report to the manager when I have:

1. Norovirus
2. Salmonella Typhi (typhoid fever)
3. Shigella spp. Infection.
4. E.coli infections (Escherichia O157:H7 or other EHEC/STEC infection)
5. Hepatitis A

Note: The manager must report to the Health Department when an employee has one of these illnesses

**Reporting: Exposure to Illness**

I agree to report to the manager when I have been exposed to any of the illnesses listed above through:

1. An outbreak of Norovirus, typhoid fever, Shigella spp. Infection, E. coli infection, or Hepatitis A.
2. A household member with Norovirus, typhoid fever, Shigella spp. Infection, E. coli infection, or Hepatitis A.
3. A household member attending or working in a setting with an outbreak of Norovirus, typhoid fever, Shigella spp. Infection, E. coli infection, or Hepatitis A.

**Exclusion and Restriction from Work**

If you have any of the symptoms or illnesses listed above, you may be excluded\* or restricted\*\* from work.

\*If you are excluded from work you are not allowed to come to work.

\*\*If you are restricted from work you are allowed to come to work, but your duties may be limited.

**Returning to Work**

If you are excluded from work for having diarrhea and/or vomiting, you will not be able to return to work until more than 24 hours have passed since your last symptoms of diarrhea and/or vomiting.

If you are excluded from work for exhibiting symptoms of a sore throat with fever or for having jaundice (yellowing of the skin and/or eyes), Norovirus, Salmonella Typhi (typhoid fever), Shigella spp. Infection, E. coli infection, and/or Hepatitis A, you will not be able to return to work until Health Department approval is granted.

**Agreement**

I understand that I must:

1. Report when I have or have been exposed to any of the symptoms or illnesses listed above; and
2. Comply with work restrictions and/or exclusions that are given to me.

I understand that if I do not comply with this agreement, it may put my job at risk.

Food Employee Name (print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Employee\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manager (Person-in-Charge) Name (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Manager (Person-in-Charge)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***An employee health policy for each employee/volunteer or an addendum attached to this policy must be kept on site at each event.***

**Employee Health Policy Addendum**

**Temporary Food Service Establishment Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* Employees or volunteers who handle food or food contact surfaces should be aware of the requirements for reporting illnesses and symptoms. Employees who have been trained on this information should sign the Employee Health Policy Agreement (single use) or may sign this addendum form (multiple use) instead. If this form is used for multiple use, the policy should be attached.

\*\*Single use agreements for each employee or this addendum (attached to the policy) must be kept on-site at the event.

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| Date | Employee Print | Employee Signature | Manager Print/Sign/Initial |
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