



North Central Public Health District
Environmental Health Program
417 East 7th Street
The Dalles, OR 97058
Phone: 541-506-2603

For Office Use Only:
Receipt #: _____
Date Issued: _____
Fee Paid: _____

TEMPORARY RESTAURANT LICENSE APPLICATION

Completed form and fees must be received at least seven (7) days prior to the event to avoid a late fee.

This application is for Single Events only. A separate operational plan review is required for Intermittent and Seasonal licenses. Please contact this office at 541-506-2603 for additional information.

Please check all that apply

- License Type: Single Event (one day only) Single Event (two or more days)
- Benevolent, **Non-Profit Tax ID#** _____
- Licensed Mobile Unit from another Oregon County; must provide your current license and copy of last inspection to qualify.

Restaurant, Organization, or Booth Name: _____

Applicant Name: _____ **Phone:** _____

Mailing Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Email Address: _____

Hours of Food Service Operation _____ **Date(s):** _____

Event Name (as advertised or otherwise listed): _____

Event Coordinator (name): _____

Event Address: _____

Event Contact (phone, email of the person in charge of the event): _____

1. Person(s) in charge of booth during operation: _____

2. All food must be from an approved source and should be prepared at the booth the day of the event. If preparation before the event is necessary it must be done at a facility licensed by the Local Health Department or the Department of Agriculture. **NO HOME-PREPARED FOODS ALLOWED.**

Name, Address and Phone number of Facility Used for ANY off-Site food Prep, Storage, and Utensil Washing (if applicable): _____

If preparation before the event is necessary, describe how the food will be cooked and rapidly cooled (include container type, food depth, and equipment). Some foods requiring extensive cooling and reheating may be prohibited.

3. All water (including ice) utilized during the event must be obtained from an approved public water supply

a. Source of drinking water: _____

b. How will you dispose of liquid waste: _____

4. Food Temperature Control: How will you provide for proper food temperature control:
- Cold-holding devices (e.g., refrigerators, coolers, ice, cooling wands):
Describe: _____
 - Hot-holding devices (e.g., portable warmer, steam table, heat cabinet)
Describe: _____
 - Rapid-heating devices (e.g., stove, oven, burner)
Describe: _____
5. Leftovers: What will you do with food left at the end of the event/each day? _____
6. Approved sanitizer and proper test strips: Chlorine Quaternary ammonium Other: _____
7. Menu: List all food items, including toppings

<u>Food Item</u>	<u>Served</u>	<u>Preparation</u>	<u>Describe cooking method</u>
<i>Ex. Hamburger</i>	Hot <input checked="" type="checkbox"/> Cold <input type="checkbox"/>	At event <input checked="" type="checkbox"/> Off-site <input type="checkbox"/>	<i>Frozen patties are cooked well done on BBQ grill</i>
	Hot <input type="checkbox"/> Cold <input type="checkbox"/>	At event <input type="checkbox"/> Off-site <input type="checkbox"/>	
	Hot <input type="checkbox"/> Cold <input type="checkbox"/>	At event <input type="checkbox"/> Off-site <input type="checkbox"/>	
	Hot <input type="checkbox"/> Cold <input type="checkbox"/>	At event <input type="checkbox"/> Off-site <input type="checkbox"/>	
	Hot <input type="checkbox"/> Cold <input type="checkbox"/>	At event <input type="checkbox"/> Off-site <input type="checkbox"/>	
	Hot <input type="checkbox"/> Cold <input type="checkbox"/>	At event <input type="checkbox"/> Off-site <input type="checkbox"/>	
	Hot <input type="checkbox"/> Cold <input type="checkbox"/>	At event <input type="checkbox"/> Off-site <input type="checkbox"/>	

8. Booth Design:
Type of Overhead Protection: _____
Type of Flooring: _____
Type of Food Protection (e.g., sneeze guards, lids, etc.): _____
9. Hand-washing facilities: Must be set up before any food preparation takes place
Describe: _____
10. Dishwashing facilities
Describe: _____
11. Where will you dispose of garbage: _____
12. Submit valid Oregon Food Handler Card(s) with application. There must be at least one certified worker per shift; available online at www.orfoodhandlers.com
13. Must Obtain Before Event
 Probe Thermometer (*Range of 0° -220°F, calibrated/accurate*) to check food temperatures; *thin tip digital thermometer needed if cooking raw meat*
 Refrigerator Thermometer in every cooler/refrigerator unit

Supporting Documents:

Please familiarize yourself with the information contained in the Temporary Restaurant Operator Handout.
<https://www.oregon.gov/oha/ph/healthyenvironments/foodsafety/documents/tempguide.pdf>

Signature of Applicant: _____ Date: _____