



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
ENVIRONMENTAL HEALTH PROGRAM**
155 North First Avenue, MS 5, Suite 160
Hillsboro, OR 97124
Telephone: (503) 846-8722 ♦ Fax: (503) 846-3705
www.co.washington.or.us/foodsafety



Public Health
Prevent. Promote. Protect.

Temporary Food Event — Oversight Organization Coordinator’s Checklist

Thank you for providing this information about your event, this will help our inspectors understand the amenities available for the booth operators to use and what the booths will have to provide for themselves.

Coordinator Name: _____ **Onsite phone:** _____
Event Name: _____ **Event Date(s):** _____
Event Location: (include city, state, zip) _____
Event Set-up Time: _____ **Event Operation Time:** _____
Number of Food Booths Expected: _____ **Alternate Onsite Phone:** _____

1. Services Provided by Oversight Organization:

- a. Restroom facilities for food service workers: Yes ___ No ___
- b. Handwashing facilities within 15 feet of food booths with unpackaged foods: Yes ___ No ___
- c. Dishwashing facilities: Yes ___ No ___
- d. Sewage disposal (sewer connections, holding tanks): Yes ___ No ___

2. Please list the number that will be available

Public Portable Toilets: _____ Public Restrooms: _____ Handwashing Stations: _____
 Largest number of anticipated attendees at any one time: _____

3. Who is responsible for the following?

Garbage pick-up: _____ (frequency) _____
 Potable Water: _____ Food-Grade Hose: _____
 Backflow Preventor: _____ Electricity: _____
 Pest control (yellow jackets, flies): _____

4. Have food vendors been notified to submit a temporary restaurant license application and pay license fee two weeks PRIOR to the event? Yes ___ No ___

5. Will there be food vendor meetings prior to the event? Yes ___ No ___

If yes, please indicate the following:

Date _____ Time: _____ Location: _____

6. Will you provide refrigeration for the food vendors? Yes ___ No ___

If yes, please describe _____

7. Will you provide electricity for the food vendors? Yes ___ (Public Utility ___ Generators ___) No ___

NOTE for food booths operating electrical equipment: Food booths may not operate if they do not have enough electricity to power their electric cooking and food holding equipment. Verify operators’ electrical requirements BEFORE you give them permission to operate at your event. Total watts of equipment used for all approved booths must be within the limit of available electricity.

8. Please attach a list of the food booths approved by the organization to be at the event. Include owner’s name, address, and phone number of each food booth.

Name of Coordinator (signature)

Daytime Phone Number (if different from onsite phone number)

Address (include city, state, zip)

E-mail Address