



www.kchd.wv.org

KANAWHA-CHARLESTON HEALTH DEPARTMENT

108 Lee Street, East /PO Box 927

Charleston, WV 25323-0927

(304) 344-KCHD (5243)

Event Coordinator Application- Temporary Food Event

Return the Environmental Health Office 7 Days Prior to Event

By providing the following information, you will assist and identify potential public health problems that might occur during your event. Solving these problems in advance will provide the opportunity for a successful operation.

Please attach a list of all proposed food vendors and their contact information. An event layout shall also be attached that shows the name and location of each booth, location of restrooms, sewer, water, and electrical connections.

- Name of Event: _____ Event Date: _____
- Event Location: _____
- Name of Event Coordinator/Responsible Persons **AND** phone number:
 1. _____
 2. _____
 3. _____
- Number of anticipated food booths: _____ Event set up time: _____
- Potable Water Supply: _____
- Approved Water Disposal Method: _____
- Restroom facilities shall be provided. If portable toilets are used, handwashing sinks **shall** be provided. If portable toilets are being used who will supply them: _____
- Will electricity be supplied to each booth? Yes _____ No _____
- Will equipment/utensil washing facilities be provided? Yes _____ No _____
- How will the garbage be disposed of? _____

PLEASE PROVIDE A TEMPORARY FOOD PERMIT APPLICATION TO ALL VENDORS.

Signature: _____ Title: _____

Home/Cell Phone: _____ Work Phone: _____

Administration	Clinic	Environmental	Epidemiology	Health Promotion
Phone: 304.348.6494	Phone: 304.348.8080	Phone: 304.348.8050	Phone: 304.348.1088	Phone: 304.348.6493
Fax: 304.348.6821	Fax: 304.346.4756	Fax: 304.348-8054	Fax: 304.384.8149	Fax: 304.348.6821



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TEMPORARY FOOD PERMIT APPLICATION

1. NAME OF THE TEMPORARY FOOD ESTABLISHMENT(S): _____

2. DATE OF APPLICATION: _____

3. NAME OF ORGANIZATION: _____

4. NAME OF PERSON IN CHARGE: _____

5. MAILING ADDRESS (INCLUDE CITY AND ZIP CODE): _____

6. TELEPHONE NUMBER: (HOME/CELL) _____ (WORK) _____

7. NAME OF EVENT: _____

8. DATE(S) AND TIME(S) OF EVENT: _____

9. LOCATION OF EVENT: _____

10. HOW WILL FOOD BE KEPT HOT OR COLD?

PLEASE LIST MENU ON THE BACK OF THIS FORM

(If claiming exemption or nonprofit status please complete the nonprofit temporary food form with the tax-exempt ID number)

STATEMENT: I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.

DATE: _____ AUTHORIZED SIGNATURE: _____

PRINT NAME: _____

OFFICE USE ONLY

EXEMPT: () YES () NO

APPLICATION APPROVED: () YES () NO BY: _____

Administration		Clinic		Environmental		Epidemiology		Health Promotion	
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NONPROFIT TEMPORARY FOOD FORM

§16-6-3. Hotel and restaurant defined; hotels and restaurants not subject to provisions of article.

For the purpose of this article, every building where food and lodging are usually furnished to guests and payment required therefore shall be deemed a hotel, and every place where food without lodging is usually furnished to guests and payment required therefore shall be deemed a restaurant. But the provisions of this article, except those of sections twenty and twenty-two, shall not apply to any hotel wherein there are fewer than ten bed chambers, nor to any hotel known as a "summer hotel" which is not open for guests from November fifteenth to May fifteenth. The provisions of this article shall not apply to temporary food sales, not exceeding two weeks in length, by religious, educational, charitable or nonprofit organizations.

I hereby certify that I have read and understand the above noted section of the WV Code.

I, _____ do hereby claim exemption from the requirements of the WV Food Service Sanitation Regulations. My organization's identity and status is:

- RELIGIOUS ORGANIZATION
- EDUCATIONAL ORGANIZATION
- CHARITABLE ORGANIZATION
- NONPROFIT ORGANIZATION

ORGANIZATION'S NAME _____

ADDRESS _____

TELEPHONE NUMBER _____

AGENT/REPRESENTATIVE _____

TAX EXEMPT ID# _____

AGENT/MEMBER

DATE

Administration		Clinic		Environmental		Epidemiology		Health Promotion	
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Fax:	304.348.6821	Fax:	304.346.4756	Fax:	304.348-8054	Fax:	304.384.8149	Fax:	304.348.6821