



Buncombe County Environmental Health

30 Valley Street
Asheville, NC 28801
Phone (828) 250-5016
Fax (828) 250-6161

Temporary Food Establishment Organizer Application

This application must be submitted with a map of the event site indicating the location of all of the food booths. In addition to this Organizer Application, a separate **Food Vendor Application** must be submitted by each food service vendor participating in the event or exhibition. Please Note:

- Applications can be mailed, emailed, faxed, or submitted directly to 30 Valley Street, Asheville NC 28801; Fax: 828-250-6161; email EHRequest@buncombecounty.org.
- **The Organizer Application, Event Map, and Food Vendor Application(s) must be submitted, and payment received, no later than 15 days prior to the event.**
- A fee of \$75.00 will be required for each food service permit and must be paid with the submission of each Food Vendor Application

Event Information

Name of Event: _____

Address of Event: _____
Street City State Zip

Event Date(s)*: _____
*If an event is occurring non-consecutively, please list **ALL** dates.

Event Type: Transitory Fair Carnival Circus Festival Public Exhibition

Agritourism Business Other (please specify): _____

Organizer Information

Organizing Business Name: _____

Organizing Business Address: _____
Street City State Zip

Primary Contact Person: _____

Primary Contact Email: _____ Primary Contact Phone: _____

Additional Contacts: _____

Additional Contact Email: _____ Additional Contact Phone(s): _____

Number of anticipated food vendors: _____

Vendor information: *if more space is needed for additional vendors, please attach it to application.

Vendor Business Name	Vendor Contact Person	Vendor Phone	Vendor Email
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Date/Time when Food Vendor(s) will be ready for permitting: _____

Source of Water for Food Vendor(s). Check the option which applies, and provide descriptions where indicated:

Water Source	
	Municipal/Public water access on site of the event. Describe location/point of access (example: Church kitchen sink):
	Bottled potable water purchased and supplied by food vendor(s). <i><u>Note- this option has limitations to approval based on size and type of food operation and cannot be approved in all situations.</u></i>
	On-site Private Well (*requires testing and approval by BCHHS prior to event)
	Other (describe):

Wastewater disposal for Food Vendor(s). Check the option that applies, provide descriptions where indicated:

Wastewater Disposal	
	Disposal in approved sewage system. <i>Note: If the event venue is not a facility holding a permit from BCHHS, such as a restaurant or lodging facility, the Organizer must obtain and provide written approval from the Metropolitan Sewerage District (MSD) by emailing the following email address: pretreatment@msdbc.org.</i> Describe location/point of access (example: Brewery mop sink):
	Grey water tank with removal service (*must provide copy of agreement with company.) Name of contracted company:
	Other (describe):

Check the following items that will be supplied by the Organizer/event space for the food vendor(s):

Yes	No	Items provided by organizer/event space
		Electricity
		Refrigeration
		Garbage / Recycling disposal <i>(must be dumpsters or cans with lids, open-top units cannot be approved)</i>
		Toilet facilities
		Approved potable water hose(s) with backflow preventer
		Cooking oil disposal (if needed)

Will the event include a petting zoo or pony rides*? Yes No

*If yes, how many dedicated hand washing facilities will be available? _____

I certify that the information in this application is complete and accurate. I understand that any changes to my operation must be submitted to Buncombe County Health and Human Services for review and approval prior to the day of the event. I also understand that if the Vendor(s) is/are not set up at the agreed upon permitting time with the inspector, a permit may not be issued.

Organizer Signature: _____ Date: _____

Submit this application, and event map by mail, fax or email to:
Buncombe County Environmental Health Attention: TFE Permitting
 30 Valley Street, Asheville, NC 28801
 P: (828) 250-5016 / F: (828) 250-6161 email: EHrequest@buncombecounty.org