



Mecklenburg County Health Department

Temporary Event Organizer Application

This application must be completed and submitted to the Mecklenburg County Health Department (MCHD) to provide information about all food preparation and sales to the public at any public event or exhibition within Mecklenburg County. 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. This application must be submitted with a map of the event site indicating the location of all of the food booths. Please Note:

- This application, map, and Food Vendor Application(s) must be submitted 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.

1) Name of Event: _____ Date of Event: _____

2) Address of Event: _____
Street City State Zip

3) Event Date(s): _____

4) Organizer Name: _____ Organizer Phone: _____

5) Organizer Address: _____
Street City State Zip

6) Additional Organizer Contacts: _____ Additional Phone: _____

7) Organizer Email: _____

8) Number of Anticipated Food Booths: _____ 9) Date/Time of Food Booth Set Up: _____

10) Source of Water for Food Booths (check the box which applies for all food vendors):

- | | |
|---|--|
| <input type="checkbox"/> Public Water Supplied by Organizer | <input type="checkbox"/> On-site Private Well (<u>requires</u> testing by MCHD) |
| <input type="checkbox"/> Water Supplied by Food Vendor | <input type="checkbox"/> Other: _____ |


11) Check the following items supplied for the food booths by the organizer:

- | | | |
|--|---|---|
| <input type="checkbox"/> Electricity | <input type="checkbox"/> Drinking Water | <input type="checkbox"/> Garbage Pick-up |
| <input type="checkbox"/> Refrigeration | Hose(s) | <input type="checkbox"/> Grease Disposal |
| <input type="checkbox"/> Toilet Facilities | <input type="checkbox"/> Recycling | <input type="checkbox"/> Waste Water Disposal |

12) Will the event include a petting zoo or pony rides?

- Yes* *If "yes", how many hand wash facilities will be available? _____
- No

I certify that the information in this application is complete and accurate. I understand that any changes to my operation must be submitted to the Mecklenburg County Health Department for review and approval prior to the day of the event:

 Organizer Signature: _____ Date: _____

**Submit this application, all Food Vendor Applications, permit fee(s) and event map to:
Mecklenburg County Health Department, Attention: TFE Permitting
700 North Tryon St., Ste. 208, Charlotte, NC • 28202-2222 • Phone: (704) 336-5100**