



San Francisco City and County
Department of Public Health
Environmental Health Section
Consumer Protection Program

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Food Concessionaire Application

This application is to be completed by each Temporary Food Facility (TFF).
 Complete item #3 below and indicate if the facility is the same as #2. *Note: N/A will not be accepted.*
 The sponsor shall collect all the applications and submit them as a packet **at least two weeks prior** to the event.

1. Name of Event: _____ **Location:** _____

Date(s): _____ Number of 10' x 10' booths: _____ Number of carts: _____

Start Time (concession will be ready for inspection): _____ End Time (no further cooking/food sales): _____

2. TFF Applicant/Company Name: _____

Address: _____

Phone: _____ Fax: _____ E-mail: _____

On-site representative: _____

3. Name of facility for equipment cleaning & sanitizing, equipment storage, and food storage (commissary):

Name & Address: _____

Phone: _____ Fax: _____ E-mail: _____

Travel time from off-site preparation to event location: _____

4. Hand Washing Facilities: _____ **Plumbed sink:** _____

Warm H₂O gravity flow station: _____

5. Utensil Sanitizing Method: _____ **3-compartment sink:** _____

Other method approved by SFPDPH: _____

6. Temperature Control Methods: _____ **Hot (135°F or above):** _____

Cold (45°F or below): _____

Food Item	Off-Site Prep.	Cooking Procedures	Holding Temperature Methods
<i>Example: raw chicken</i>	<i>yes</i>	<i>grill to internal temp = 165°F</i>	<i>chafing dishes with flame</i>

I have read & understood the TFF Concessionaire Operating Requirements & Checklist attached to this form _____ (initials).

Applicant signature: _____ Date: _____

Printed name: _____

TEMPORARY EVENTS PROGRAM