

**Alameda County Environmental Health Department – Sponsor Application
Health Permit Application for Sponsors of Food Facilities at Temporary Events in Alameda
County Excludes Berkeley**

Office Use Only			
Date Rec'd _____		Rec'd By _____	
Amt \$ _____		EV# _____	
Approved By _____		Date _____	
Name of Sponsor/Organizer (please print): _____			FA# _____
Person in Charge _____ Title _____			
Phone: _____		Fax: _____	
E-mail _____			
Business Address		Mailing Address	
_____		_____	
Street # _____	Street Name _____	Street # _____	Street Name _____
City _____	State _____ Zip _____	City _____	State _____ Zip _____

Name of Event _____	
Location of Event & City _____	
Date(s) of the Event _____	Time of Day _____
Check one: ☐ Indoor ☐ Outdoor ☐ Other	

Number of Mobile Food Trucks _____ **Number of Temporary Food Booths** _____

Permit Fees	1-4 Contiguous Days (Same Event) Temporary Food Booths only			Recurring Non-Contiguous Up to 12 Months (Same Event)
Program Element	1911	1913	1914	1915
Number of Booths	2-15 Food Facilities	16-50 Food Facilities	50+ Food Facilities	
Fee	\$218	\$349	\$433	\$408
*Fee with penalty	\$327	\$523.50	\$649.50	\$612
*Fee Exempt Forms	https://deh.acgov.org/operations-assets/docs/tff/Fee-Exemption-Requirements.pdf			

*** Applications and payment received less than 5 business days prior to the event will be charged a 50%penalty.**

*** All Fee Exempt permit applications received less than 5 days prior to an event are subject to a \$54.00 penalty.**

Note: If an event is cancelled or an application is rejected, 50% of the application fee may be refundable.

Email your application to DEHWEBBILLING@acgov.org or walk-in your application to 1131 Harbor Bay Pkwy Alameda CA 94502-6540.

To pay by credit card: Follow the instructions emailed to you from our Finance Department sent with your invoice. Call 510-567-6858 if you need online payment assistance.

A 14 business day hold will occur before issuance of permit(s) if paying by check.

Application completed by _____ Title _____

Signature of Applicant _____ Date _____

Phone _____ Contact Phone # the day of the Event _____

Approvals

Please obtain all required local city/country permits and approvals, e.g. Business License, Fire Department, Street Use and Insurance Carrier.

California Health and Safety Code Section 114381.1 A Sponsor/Organizer Permit is required for each event. Permits must be obtained prior to the event. Permits must be posted at each Food Facility Booth.

Submit a Site Plot Plan (Health and Safety Code section 114381.1)

Submit two sets of plans, 10 working days prior to event date, indicating the proposed location of the following:

1. Location of each food facility including food booths.
2. Show location of Potable Water Supply and Waste Water disposal area.
3. Show location of toilet and handwashing facilities and note the quantity at each location.
For every 15 food handlers (about 1 toilet per 4 booths).
Provide additional toilets for the public.
4. Trash, Manure, and Grease disposal containers.
5. Common Food Storage Facilities (Dry or Refrigerated storage).
6. Write in the distances from food booths to all other facilities on plot plan.

Water Supply

Location of potable water _____

Quantity of potable water (at least 20 gallons/booth per day) _____

Maximum distance to a temporary food booth from the water supply _____

Liquid Waste Disposal

Location of disposal _____

Type of container or disposal method _____

Capacity of container _____

Trash, Grease and Manure Disposal

Number of containers provided _____

How often are trash containers emptied? _____

If animal manure is present, how often is it removed? _____

Is there a central refuse collection site? (Indicate it on the plan.) ☐ Yes ☐ NoIs there a secondary refuse collection site? (Indicate it on the plan.) ☐ Yes ☐ No

Person(s) Responsible for trash/manure removal.

Name _____ Address _____

Toilet Facilities

A minimum of one toilet for every 15 food handlers is required.

Number of toilets: FIXED _____ PORTABLE _____ (with water, soap & towels inside)

Location and distance from food facilities.

Location _____ Maximum distance from food facilities _____ feet (show on plan)

Do the toilet facilities have handwashing inside? (i.e., running water, liquid soap and towels in dispensers?)

☐ Yes ☐ No

Give details _____

Lighting and ElectricalIf it is a night event, will you have lighting? ☐ Yes ☐ No

Give details _____

Is electrical service provided for mobile food facilities and/or equipment at food booths? ☐ Yes ☐ No**Handwashing Facilities for Each Booth**

One handwashing station per food booth is required and will be provided by:

☐ Event Sponsor OR ☐ Booth Operator

What type of hand wash station will be provided?

*Minimum: (1) 5 gallons of warm water**(2) Liquid soap and single use towel**(3) Wastewater container*☐ Permanent Plumbed facilities☐ Temporary facilities☐ Other _____

Sponsor Contract

Regulations for Sponsors of Food Facilities operating at Community Events

1. **Submit** a completed sponsor application form at least 10 working days prior to the planned event date.
2. **Confirm** that every food vendor has a current health permit issued specifically for the event (original permits must be posted for public view at each facility/booth).
3. **Provide** solid and liquid waste receptacles, portable toilets (1 per 15 persons), and sufficient hand washing facilities furnished with liquid soap and disposable paper towels.
4. **Provide** site maps, detailing the locations of the food courts, toilets, hand washing facilities, solid and liquid waste disposal sites.
5. **Protect** the employees of the Alameda County Environmental Health Department from any abuse or harassments by individuals or representatives of other organizations, while the county employees are performing their assigned duties.
6. **Pay for any or all unpermitted food facilities** found operating at the event without prior authorization from the Alameda County Environmental Health Department.
7. **I agree** that failure to comply with any or all of the above stated regulations may be a sufficient reason to deny me the issuance of a sponsor health permit now and in the future.
8. **I will renew my Sponsor Permit at least two weeks prior to the permit expiration date** if the event occurs in the same location with the same schedule (weekly, bi-weekly, monthly, etc.).
9. **Complete** the Sponsor's Food Vendor List on page 5 or submit your own. Permit Applications submitted without an attached Sponsor's Food Vendor List will be rejected.

Name of the Event: _____

Location of the Event and City: _____

Date(s) of the Event: _____

Sponsor's Name: _____

Sponsor's Signature: _____ **Today's Date:** _____

Permit Questions: Stephanie.Lee@acgov.org **Unit Supervisor:** Valerie.Strother@acgov.org

SPONSOR'S FOOD VENDOR LIST

EVENT NAME: _____ EVENT DATE(S): _____ EVENT START TIME: _____

NAME OF TEMPORARY FOOD BOOTH	
1	
2	
3	
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LIST ALL FOOD TRUCK, TRAILERS AND CARTS AND ATTACH A COPY OF THE CURRENT ALAMEDA COUNTY HEALTH PERMIT	
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Sponsor Name: _____ Phone: _____ Cell: _____