



CONTRA COSTA
HEALTH

2120 Diamond Blvd, Suite 100 | Concord, CA 94520 | Phone: (925) 608-5500 | Fax: (925) 608-5502
www.cchealth.org/eh

**CATERING BUSINESS
PERMIT TO OPERATE APPLICATION**

SECTION 1: Catering Business Name, Description of Business (Types of events/business activities, foods prepared and menu)

Catering Business Name:
Year of Operation (valid years are from 3/1 to 2/28 the following year):
Types of Foods:
Menu (or attach separate menu):

SECTION 2: Contact Information

(Production Kitchen Address and Permit Holder Address must be different addresses.)

A. Production Kitchen Name and Address:

PRODUCTION KITCHEN NAME / DBA:		
FACILITY ADDRESS:		
CITY/STATE/ZIP CODE:	PHONE #:	FAX #:
CONTACT PERSON:	PRODUCTION KITCHEN EMAIL ADDRESS:	

B. Catering Business Name and Mailing Address: (Permits and Invoices will be mailed to this location)

CATERING BUSINESS NAME:		
ADDRESS:		
CITY/STATE/ZIP CODE:	PHONE #:	FAX #:
WEBSITE ADDRESS:	CATERING BUSINESS EMAIL ADDRESS:	

C. Catering Business Permit Holder Name and Address:

(Production Kitchen Address and Permit Holder Address must be different addresses.)

PERMIT HOLDER NAME (As it appears on Driver's License or Federal Tax I.D.):		
PERMIT HOLDER ADDRESS:		
CITY/STATE/ZIP CODE:	PHONE #:	FAX #:

D. **Email Address:** To receive electronic copies of the Official Inspection Reports. Email address that is provided needs to be able to **accept email from external email addresses.**

E. **Email Address (if different than Part D):** For any newsletters involving changes in state law. Email address that is provided needs to be able to **accept email from external email address.**

SECTION 4: Attachments with Application

- Signed Production Kitchen Agreement Catering Checklist Menu
- Proposed production use calendar (not required at time of submittal)
- Current Food Safety Manager Certificate(s) and Food Handler Cards (not required at time of submittal)
- Standard Operations Procedures (SOPs)

SECTION 5: Verification of Permit Fee Exemption (if applicable)

- Veterans:** Signed Permit Fee Exemption & Self-Attestation Form **Required**, please provide proof of your business' Internal Revenue Service Tax exempt form.
- Charitable or Tax Supported Institutions:** Signed Permit Fee Exemption & Self-Attestation Form **Required**, please provide honorable discharge papers for you and any co-owner(s).
- Blind:** Signed Permit Fee Exemption & Self-Attestation Form and provide certificate signed by a licensed physician or by the State Bureau of Vocational Rehabilitation that person is blind (having not more than ten percent visual acuity in the better eye without correction) are **Required**

SECTION 6: Terms/Signature

The undersigned hereby certifies all of the information provided on this application is true and accurate and agrees to notify Environmental Health Services of any changes that occur including the type of business activity, name, business location, menu, equipment, billing address, ownership and/or closure.

The undersigned hereby applies for a Permit to Operate and agrees to operate in accordance with all applicable state and local regulations, laws, and such inspection procedures needed to ensure compliance. The Caterer Permit to Operate is valid until the end of February each year. Submittal of a complete application packet and current fee, including outstanding balances, if any, are required on a yearly basis to secure a valid permit before continuing operations in Contra Costa County. Failure to do so may result in a misdemeanor citation, infractions, permit suspension/revocation proceedings, and/or closure.

PERMITS ARE NOT TRANSFERABLE

Signature(s) must be an Owner, Partner or Corporate Officer (Corporation and Limited Liability Companies). A manually signed copy of this application delivered by facsimile, email, or other electronic transmission shall be deemed to have the same legal effect as delivery of an original signed copy of this application.

APPLICANT NAME: (Please print) _____

Signature of Applicant: _____ Date _____

FOR OFFICE USE ONLY

FA#:	AR#:	PR#:	0622	REHS:	SUPERVISOR:	RECEIVED BY:	DATE RECEIVED:
AMOUNT DUE for Inspection Fees: \$		AMOUNT DUE for Permit (Prorated, if needed): \$		TOTAL Amount Due: P/E:		AMOUNT PAID: \$	
CASH:				CHECK #:		RECEIPT #:	
CREDIT CARD: <input type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> D/C						XR	



CONTRA COSTA HEALTH

2120 Diamond Blvd, Suite 100 | Concord, CA 94520 | Phone: (925) 608-5500 | Fax: (925) 608-5502
www.cchealth.org/eh

PRODUCTION KITCHEN AGREEMENT FOR CATERERS

1. TO BE COMPLETED BY OWNER OF CATERING BUSINESS

Owner Name:		Name of Catering Business:		
Owner Address:		City:	State:	ZIP:
Cell Phone:	Alternate Phone:		Email:	

- I will notify Contra Costa County Environmental Health, by written document, of any change in the status of my operation or when the Production Kitchen contract is terminated.
- I hereby state that the above information is current, true and correct to the best of my knowledge and agree to use the Production Kitchen in accordance with the California Health and Safety Code. This agreement will expire at the end of each permit year and must be submitted annually, along with the Caterer Business Permit to Operate Application.

Signature: _____ **Print Name:** _____ **Date:** _____

2. TO BE COMPLETED BY PRODUCTION KITCHEN OWNER OR OPERATOR

Type of Facility:	Restaurant	Production Kitchen	
Name of Production Kitchen:			
Facility Address:	City:	State:	ZIP:
Owner Name:	Phone:	Email:	

I agree to provide to the above mentioned applicant access to the following:

- | | |
|-----------------------------------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Hand washing facilities | <input type="checkbox"/> Ice machine or cooling equipment |
| <input type="checkbox"/> Food preparation area | <input type="checkbox"/> Potable water |
| <input type="checkbox"/> Food preparation sink | <input type="checkbox"/> Garbage and refuse disposal |
| <input type="checkbox"/> 3-Compartment warewash sink | <input type="checkbox"/> Dry food/equipment storage |
| <input type="checkbox"/> Refrigeration/Freezer storage | <input type="checkbox"/> Chemical storage |
| <input type="checkbox"/> Cooking equipment and ventilation hood | <input type="checkbox"/> Restroom with hand washing facilities |

I hereby declare that I hold a valid Environmental Health Permit to operate a Production Kitchen. (Include a copy of a valid health permit). I certify that the business named in section 1 is operating out of the above Production Kitchen.

I will notify Contra Costa County Environmental Health Division by written document of any change in the status of my operation, my environmental health permit, or when this Production Kitchen/Approved Facility agreement is terminated.

Signature of Owner/Manager: _____ **Print Name:** _____ **Date:** _____

FOR OFFICE USE ONLY

FA#:	PR#:	PE: 0622	Received By:	Date Received:
REHS:			Date:	



CONTRA COSTA HEALTH

2120 Diamond Blvd, Suite 100 | Concord, CA 94520 | Phone: (925) 608-5500 | Fax: (925) 608-5502

www.cchealth.org/eh

Definitions:

CATERER CHECKLIST

- **Catering Business** means a person, business, or food facility that is permitted and regulated by this division to prepare, transport, and serve food, beverages, and/or related food services to the public. The food is stored and prepared in an approved, permitted, food facility and regulated under the California Retail Food Code (CRFC) through an annual permit.
- **Consumer** means a person who is a member of the public, takes possession of food, is not functioning in the capacity of an operator of a food facility, and does not offer the food for resale.
- **Cook-for-Hire** means a person who is hired to prepare and/or serve food at a private residence. All food prepared by the cook-for-hire is handled at the private residence and not open or advertised to the public. A cook-for-hire is not a food service/catering operation. It is not regulated by this division and does not require a health permit to operate. ***A cook-for-hire must purchase/obtain the food immediately prior to the start of the event. Storage or handling at any location other than the private home requires a retail food or caterer permit.**
- **Retail** means the storing, preparing, serving, manufacturing, packaging, transporting, salvaging, or otherwise handling food for dispensing or sale directly to the consumer or indirectly through a delivery service.

Catering Application Packet Checklist:

1. Prior to receiving a permitting inspection to obtain a Catering Permit, the following items are required:

Check each box-

- Catering Business Permit to Operate Application** (with required documents to verify ownership)
- Health Permit to Operate Fee Payment** (submit with application)
- Caterer Checklist** (submit with application)
- Production Kitchen Agreement** form (submit with application)
- Catering Menu** (submit with application)
- Valid **Food Safety Certification** and **Food Handler Cards** (receipt of enrollment is acceptable)
- Standard Operating Procedures (SOPs)**
- Verification of permit fee exemption (if applicable)

Caterer Checklist – Food Safety Requirements

1. Food, Equipment, and Utensils: Protection from Contamination:

- No home-prepared food may be served (Note: use of cottage food products must be approved with our division before use). All food, utensils and equipment must be stored and cleaned at the designated permitted food facility (production kitchen).
- The caterer must maintain control over the food (including periods of storage, preparation, and transportation). All food must be adequately protected so as to be maintained pure and free of contamination, adulteration, and spoilage.
- Utensils, supplies and equipment must be of adequate construction and design (smooth, non-absorbent, easily cleanable) and protected from contamination.
- Sufficient equipment must be provided to properly store food and utensils during transport, storage, and service (hot holding units, ice chests, shelves, totes with lids, pallets, crates, chafing dishes, etc.).
- Sneeze protection and barbecue protection must be provided during the food service/catering operation.

2. Prevent cross-contamination during periods of transportation, storage, preparation, holding, service and display:

- Keep raw foods of animal origin separate and away from ready-to-eat foods; including raw food of animal origin (sushi), produce, and cooked ready-to-eat food.
- Wrap food and use covers on all containers.
- Use separate equipment, containers, cutting boards, etc; for meats, produce and ready-to-eat foods.
- Separate different types of raw foods of animal origin from each other in the following order from top to bottom. (top) fish/seafood [lowest cooking temperature required], then whole/cut pork/beef, then ground pork/beef; (bottom) poultry [highest cooking temperature required].
- Prepare each type of food at different times or in different areas; always prepare foods requiring a higher cooking temperature after those requiring a lower cooking temperature
- Pre-wash all fruits and vegetables.
- Clean hermetically sealed bags and cans with visible soil prior to opening.
- Store all food 6 inches off of the floor/ground.
- Store all open dry goods inside a tightly sealed container.
- During pauses in food preparation or dispensing, store in-use utensils used for potentially hazardous foods:
 - ✓ In the food with their handles above the top of the food

- ✓ On a clean portion of the food preparation table or cooking equipment, ensuring that the utensils and surfaces are cleaned and sanitized at least every 4 hours
- ✓ In running water with sufficient velocity to flush food particles to the drain
- ✓ In a container of water 135°F/higher or in ice water at 41°F/below
- For utensils used with non-potentially hazardous foods (ice, flour, sugar, etc.):
 - ✓ Keep stored in a clean, covered and protected location when not in use
- Use scoops with handles.
- Keep handles out of the contact with the food being dispensed.
- Transportation vehicles must be maintained in a clean and sanitary condition where food is stored.
- Ice used for refrigeration or cold holding purposes cannot be served for consumption.
- Condiments must be in pump, squeeze type containers, or single-service packets.

3. Equipment and Utensil Sanitation:

- All utensils and equipment must be pre-rinsed, washed, rinsed, sanitized, and air-dried.
- Manual warewashing must be completed as follows:
 - ✓ Pre-scrape utensils and equipment; clean and sanitize warewash areas
 - ✓ First compartment wash using hot soapy water (above 100°F)
 - ✓ Second compartment, rinse in clear water
 - ✓ Third compartment, sanitize; manual sanitation may be performed by immersion in a 100-ppm chlorine solution for at least 30 seconds (1 tbl spoon bleach/1 gal water) or immersion in a 200-ppm quaternary ammonium solution for at least 60 seconds (follow instructions on label)
 - ✓ Final step is air dry
- A mechanical dish machine must be capable of providing both of the following:
 - ✓ 120°F wash water
 - ✓ A minimum chlorine residual of 50 ppm, or 160°F utensil surface temperature water for effective sanitizing
- Equipment, food-contact surfaces and utensils shall be cleaned and sanitized:
 - ✓ Before use and between uses when working with different types of raw food of animal origin
 - ✓ Each time there is a change from working with raw foods to working with ready-to-eat foods

- ✓ Between uses with raw produce and with potentially hazardous food
- ✓ Before using or storing a food temperature measuring device
- ✓ At any time during the operation when contamination may have occurred
- ✓ At least every four hours when in use

4. Temperature Control

- Cold holding of potentially hazardous food must be held at or below 41°F.
- Hot holding of potentially hazardous food must be held at or above 135°F.
- All foods remaining unserved at the end of an event must be discarded.
- Sufficient equipment must be provided to maintain required temperatures or all perishable food during transport, storage and service (refrigerators, ice chests, steam tables, chafing dishes, etc.).
- All potentially hazardous food must be cooked to the required minimum cooking temperatures:
 - ✓ Cooked Vegetables for hot holding – 135°F
 - ✓ Seafood, beef or pork steaks, eggs – 145°F
 - ✓ Ground beef or pork -155°F
 - ✓ Poultry, stuffed foods, reheated/microwaved foods – 165°F
- When preparation includes cooling of cooked foods, foods must be quickly cooled from 135°F to 70°F within 2 hours, and from 70°F to 41°F within 4 hours. The cooling process can be accomplished by:
 - ✓ Placing foods in shallow metal pans, such as stainless steel, with product 2 inches deep
 - ✓ Separate the food into smaller or thinner portions
 - ✓ Use rapid cooling equipment, such as an ice paddle
 - ✓ Insert appropriately designed containers in an ice bath, stirring frequently
- Reheat foods quickly, within 2 hours to a minimum temperature of 165°F.
- A probe thermometer must be provided during preparation and event operation for measuring the internal temperature of food products during cold and hot holding, cooking, cooling, and reheating.

5. Food Handlers:

- All food handlers must be in good health.
- Hands and arms must be washed with soap and warm water before commencing work, after using toilet facilities, after eating or drinking, after coughing or sneezing, after touching face or hair, as often as necessary to remove soil and contamination and to prevent cross-contamination when changing tasks, or when contamination may have occurred. NOTE: Glove use does not substitute hand washing; hand sanitizer may be used in conjunction with, but not in place of, hand washing.

- Hair must be restrained at all times when working with unpackaged food.
- Outer garments and aprons must be clean.

6. Remote Facilities/Event Locations:

- One toilet for every 15 employees with adequate handwashing facilities must be available within 200 feet of the catering operation event site.
- Garbage and wastewater receptacles sufficient to contain all waste pending disposal must be provided during each operation. Wastewater must be discarded in an approved sewer system only.
- To ensure food safety and protection from cross-contamination at remote locations where no indoor kitchen facility or indoor fully enclosed structure is available, it is strongly recommended to operate within a temporary food facility booth, supplied with all necessary washing facilities and operational equipment.
 - ✓ The Temporary Food Facility booth should be fully enclosed consisting of overhead protection, walls of mesh or tarp, and washable flooring
 - ✓ Portable handwashing facilities consisting of water container with a hands-free spigot, warm water (100°F), a catch basin, pump soap, paper towels, and a trash receptacle should be conveniently located.
- Portable warewashing facilities should be provided through one of the following methods:
 - ✓ Three compartment sink with two integral metal drain boards
 - ✓ Utensil washing station consisting of three tubs; one with hot soapy water, one with hot rinse water, and one with sanitizer

The undersigned has read and understands the information provided in the Caterer Checklist and agrees to operate and function in accordance with all applicable state and local regulations, laws, and such inspection procedures needed to ensure compliance.

The Caterer Permit to Operate is valid until the end of February each year. Submittal of a complete application packet and current fee, including outstanding balances, if any, are required on a yearly basis to secure a valid permit before continuing operations in Contra Costa County.

Applicant Name: (Please print) _____

Applicant Signature: _____ Date _____



CONTRA COSTA HEALTH

2120 Diamond Blvd, Suite 100 | Concord, CA 94520 | Phone: (925) 608-5500 | Fax: (925) 608-5502
www.cchealth.org/eh

CATERER SELF-INSPECTION CHECKLIST

This checklist is designed to assist you in reviewing the condition of the production kitchen before it is inspected by this department. The items listed below represent the major areas evaluated during a permitting inspection; however it does not include all items that are evaluated during a routine inspection. Please call your Environmental Health Inspector if you have any questions.

FOOD SAFETY

- | YES | NO | |
|--------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Sneeze guards to protect exposed foods available for self-service or buffet style display. |
| <input type="checkbox"/> | <input type="checkbox"/> | All Food and cooking equipment 12 stored a minimum of 6" off the floor |
| <input type="checkbox"/> | <input type="checkbox"/> | Restrooms are not used for the storage of food, equipment, utensils, or food-related supplies. |
| <input type="checkbox"/> | <input type="checkbox"/> | All food storage containers are clean, have tight-fitting lids, labeled, made from food grade materials, and did not previously hold toxic substances. |

TEMPERATURE CONTROL

- | YES | NO | |
|--------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | A thermometer accurate to +/-2°F is provided as either an integral part of the refrigerator (ex. dial outside). |
| <input type="checkbox"/> | <input type="checkbox"/> | An accurate metal probe thermometer (0-220°F) (ex. Thermocouple); suitable for measuring food temperatures and to be readily available and regularly used to check food temperatures. |
| <input type="checkbox"/> | <input type="checkbox"/> | All refrigerators and cold holding units maintaining food at 41°F or below. |
| <input type="checkbox"/> | <input type="checkbox"/> | All hot holding units maintaining food at 135°F or above. |

PERSONNEL

- | YES | NO | |
|--------------------------|--------------------------|-----------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Food Safety manager certificate and food handler cards are current and available. |
| <input type="checkbox"/> | <input type="checkbox"/> | Person in charge has food allergen knowledge and has trained all food employees. |

WATER AND SEWAGE

- | YES | NO | |
|--------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | All sinks are fully operable with hot and cold running water. Hot water is at a minimum of 120°F. |
| <input type="checkbox"/> | <input type="checkbox"/> | All sinks drain properly. Floor drains and floor sinks are in good working order and clean. |
| <input type="checkbox"/> | <input type="checkbox"/> | Plumbing is in good repair and not leaking. |
| <input type="checkbox"/> | <input type="checkbox"/> | Cross connection control devices are properly installed and in good repair. Air gaps are provided at all indirect liquid waste lines. |

EQUIPMENT

- | YES | NO | |
|--------------------------|--------------------------|---------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | All equipment (i.e., stoves, grills, refrigerators, tables, sinks, etc.) are clean and well-maintained. |
| <input type="checkbox"/> | <input type="checkbox"/> | Inoperable equipment has been repaired, replaced, or removed from facility. |
| <input type="checkbox"/> | <input type="checkbox"/> | Only ANSI approved equipment (e.g. NSF) shall be installed or used within the facility. |
| <input type="checkbox"/> | <input type="checkbox"/> | Pressurized cylinders (i.e. CO2 tanks) are securely attached to a rigid structure. |

UTENSILS

- | YES | NO | |
|--------------------------|--------------------------|--------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Sanitizer for manual or mechanical ware washing is available. |
| <input type="checkbox"/> | <input type="checkbox"/> | Sanitizer test strips are available and used regularly to measure sanitizer concentration. |

TOILET/DRESSINGROOM/HANDWASHING SINKS

- | YES | NO | |
|--------------------------|--------------------------|---------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Toilet facilities are clean, well-maintained, and in good working order. |
| <input type="checkbox"/> | <input type="checkbox"/> | Self-closing devices on doors to restrooms and dressing rooms are working properly. |
| <input type="checkbox"/> | <input type="checkbox"/> | Single service soap and paper towel dispensers at all handwashing sinks are operable and stocked. |
| <input type="checkbox"/> | <input type="checkbox"/> | Toilet tissue is provided and dispensed permanently-mounted dispensers. |
| <input type="checkbox"/> | <input type="checkbox"/> | Legible handwashing signs are properly posted at all handwashing sinks (including kitchen area). |
| <input type="checkbox"/> | <input type="checkbox"/> | Ventilation is provided in each restroom and is functioning properly. |

LIGHTING AND VENTILATION

- | YES | NO | |
|--------------------------|--------------------------|----------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Adequate lighting and ventilation is provided throughout the facility. |
| <input type="checkbox"/> | <input type="checkbox"/> | Lights must be equipped with shatterproof protection. |
| <input type="checkbox"/> | <input type="checkbox"/> | Hood exhaust ventilation grease filters are cleaned and well maintained (no gaps between filters). |
| <input type="checkbox"/> | <input type="checkbox"/> | All heat and grease related cooking equipment is stored under approved hood. |

PEST CONTROL

- | YES | NO | |
|--------------------------|--------------------------|-----------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Facility is free from insect (e.g. flies, cockroaches) and rodent infestations. |
| <input type="checkbox"/> | <input type="checkbox"/> | Live animals, birds, or fowl are not allowed in food preparation areas. |
| <input type="checkbox"/> | <input type="checkbox"/> | Outside doors or screen doors are kept closed and self-closing devices are in proper working order. |
| <input type="checkbox"/> | <input type="checkbox"/> | Air curtains are operating properly (if available). |

REFUSE

- | YES | NO | |
|--------------------------|--------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Outside trash bins are clean, in good repair, and lids are kept closed at all times. |
| <input type="checkbox"/> | <input type="checkbox"/> | Outside premises and refuse areas are clean and well-maintained. |

OPERATION

- | YES | NO | |
|--------------------------|--------------------------|-----------------------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Floors, walls, and ceilings are clean, well-maintained, and in good repair. |
| <input type="checkbox"/> | <input type="checkbox"/> | Cleaning equipment and soiled linens are properly stored. |
| <input type="checkbox"/> | <input type="checkbox"/> | Facility has sufficient amount of storage space for food, utensils and equipment. |



CONTRA COSTA HEALTH

2120 Diamond Blvd, Suite 100 | Concord, CA 94520 | Phone: (925) 608-5500 | Fax: (925) 608-5502
www.cchealth.org/eh

Catering Standard Operating Procedures

This document will help you prepare the required written description of your proposed catering activities and the equipment and standard operating procedures that you propose to use for your catering operation. All required documents will be reviewed and when these procedures and Production Kitchen are approved, a facility evaluation will be required at the proposed Host facility location. A signed and APPROVED copy of this document must be maintained with your catering operation during all operating hours.

Please note that any changes to the menu, equipment, or procedures listed on your approved form will require another review and written approval by Environmental Health.

Catering Operation Name: _____ Health Permit #: _____

Business Owner Name: _____ Phone #: _____

E-mail: _____ Fax #: _____

Mailing Address: _____ City: _____ Zip Code: _____

Documents to Include

<input checked="" type="checkbox"/>	Check the following items as you include them with this document.
<input type="checkbox"/>	Complete and submit an application. Ensure that all information is legible.
<input type="checkbox"/>	Commissary Agreement- The Caterer must prepare and store all food and equipment at a commissary kitchen (permitted food facility). The Caterer and the proposed commissary must complete and sign a commissary agreement form. Caterers operating at host facilities are subject to limited food preparation only (HSC 113818).
<input type="checkbox"/>	Specification Sheets- Submit specification or cut sheets for your equipment, including the portable mechanical refrigeration, overhead protection/enclosure, and portable hand-washing sink(s) carts that will be utilized during a Catering event. Provide documentation that shows the certification for sanitation and electrical standards by an American National Standards Institute (ANSI) accredited certification program such as NSF, UL, ETL, etc. for all equipment and refrigeration.
<input type="checkbox"/>	Menu- Include any menus. List all food and beverages items to be served or sold. (Refer to page 2 & 5)
<input type="checkbox"/>	Food Protection Manager Certification- Provide proof that an owner or employee has a valid Food Protection Manager certificate or card.
<input type="checkbox"/>	Food Handler Card- Provide documentation that all employees have a valid food handler card.
<input type="checkbox"/>	Log- A written log must be maintained for a minimum of 90 days after each operation to include the event organizer name and contact information, location of service, menu of foods and beverages served. When operating at a host facility, the log shall include your menu and location/date/time of operation. Please describe how you will log this information (i.e. What type of database) and provide a sample of that log.

Food Production

1. Indicate the location where you will store food and equipment at the end of the day.

Commissary Name: _____ Permit #: _____

Address: _____

MENU DESCRIPTION <small>(USE ADDITIONAL SHEET ON PAGE 5, IF NECESSARY)</small>		
Indicate all the food and beverage items for sale.	WHERE WILL THE FOOD BE PREPARED?	
FOOD ITEM	COMMISSARY	ON-SITE
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

2. List equipment and utensils that will be used. Please be specific on equipment's use and function.
 For example: Equipment: Blender Intended use: Make Smoothies

Equipment	Intended use during food preparation or catering event
Refrigerator	

3. **Transport and Storage-** Describe the procedures for transportation (more than 30 minutes) and storage of food and equipment. Include methods to cold-hold and hot-hold potentially hazardous foods and the methods to hold food until service (e.g., covered chafing dishes, etc.). Include information about the proposed catering enclosure and hand sink. Please note that all potential hazardous foods not held at 41°F or below during operation shall be discarded at the end of service.

Transport Interior is constructed of smooth, washable, impervious material.

Vehicle Holding area does not drain liquid to street, sidewalk, or premises.

Hot Holding Method (135°F and above)	During Transport-
	At Event-
Cold Holding Method (41°F and below)	During Transport-
	At Event-
Other Food Storage	During Transport-
	At Event-
Equipment	During Transport-
	At Event-
Enclosure and Hand sink	Enclosure-
	Hand sink-
Closing Procedures	Food Disposal-
	Transport-

4. Cleaning- Describe the procedures you will use to clean and sanitize food contact surfaces, equipment, and utensils at the commissary.

Indicate the specific sanitizer or sanitizing method that you will use by checking the box below:

Contact with a solution of 100 ppm (parts per million) available chlorine for at least 30seconds.

Contact with a solution of 200 ppm available quaternary ammonium for at least one minute.

Check the option you will use: Commercial pre-mixed solution or I will prepare my own sanitizer solution

Statements		
Initial next to the below statements indicating that you understand and will abide by them.		
1		A Catering Operation Permit may be used to prepare and serve food at private events and permitted Host Facilities only. Operating at a Community Event or Certified Farmer's Market requires a separate health permit.
2		All food must be stored and prepared at the approved facility. Home preparation of food is prohibited. Only limited food preparation, as defined in CRFC Section 113818, is allowed at an off-site food service event.
3		When operating at an off-site food service event, a sign and permit must be posted/provided at the event premises stating the Catering Operation's business name, address, and permit number.
4		The review and approval of this Catering Operation SOP and health permit for a Caterer must be completed and paid for prior to operating.
5		Operating at a host facility is limited to a four (4) hour duration in any one twelve (12) hour period. Upon request, you must provide your operation schedule to Environmental Health for review.
6		At the end of the operational period, all multi-use utensils will be washed and sanitized at the approved commissary/permitted food facility.
7		Have access to potable water.
8		All garbage, refuse and liquid waste will be disposed of in an approved manner as approved by Environmental Health.
9		All equipment, utensils and food related items shall not be stored in a private home when not conducting catering activities.
10		Any food that has become contaminated, suspected of becoming contaminated or presumed unsafe must be discarded.

Acknowledgment

I understand and agree that if I make changes to my operating procedures, I must notify Environmental Health within 7 days. Revised operating procedures may be provided by fax, E-mail: info@nameyourcounty.us, in person or mailed to one of our offices listed at the on this form. Failure to notify Environmental Health of any changes may result in a Notice of Violation, suspension, or revocation of the Health Permit issued to me to operate as a Catering Operation. Ensure approvals are obtained from all applicable agencies prior to operation (e.g., fire, zoning, etc.).

Authorized Signature: _____ Date: _____

Print Name: _____ Title: _____



CONTRA COSTA
HEALTH

2120 Diamond Blvd, Suite 100 | Concord, CA 94520 | Phone: (925) 608-5500 | Fax: (925) 608-5502
www.cchealth.org/eh

PERMIT FEE EXEMPTION & SELF-ATTESTATION FORM

OWNER NAME:	FACILITY #:
FACILITY NAME / DBA:	PHONE #:
FACILITY ADDRESS:	CITY/STATE/ZIP CODE:

Please select all exemptions that apply:

- I am applying for a permit fee exemption as a blind person having not more than ten percent visual acuity in the better eye without correction pursuant to [Contra Cost County Ordinance Code 413-3.1002](#).

A certificate signed by a licensed physician or by the State Bureau of Vocational Rehabilitation that you are a blind person is required.

- I am applying for a permit fee exemption exclusively for religious or charitable purposes and self-attest that at least seventy-five percent of the net proceeds from my activity inures directly to the benefit of such charitable purposes pursuant to [Contra Cost County Ordinance Code 413-3.1004](#).

Please provide proof of your business' Internal Revenue Service tax exempt status.

- I am applying for a permit fee exemption as an honorably discharged veteran and self-attest that I am the sole owner of the business or activity or a co-owner with other honorably discharged veteran(s) and that I must not sell alcoholic beverages pursuant to [Contra Costa County Ordinance Code 413.3.1006](#).

Please provide documentation showing that you and any co-owner(s) were honorably discharged from a branch of the United States military.

Permit Holder / Owner Signature

Date



CONTRA COSTA HEALTH
Environmental Health Program
 2120 Diamond Blvd, Suite 100
 Concord, CA 94520
 Phone: (925) 608-5500
 Fax: (925) 608-5502
www.cchealth.org/eh/

CREDIT CARD PAYMENTS

Payments can be made using Visa, Mastercard, and Discover

CHECK ONE: BUSINESS CARD PERSONAL CARD

If you checked BUSINESS CARD above, please include the NAME OF BUSINESS ON CARD:

NAME OF BUSINESS ON CARD:	
NAME ON CARD:	
BILLING ADDRESS OF CARD (Include City/State/Zip):	
PHONE NUMBER:	EMAIL ADDRESS:

(ONLY ONE EMAIL CAN BE USED TO SEND A RECEIPT)

Add last 4 digits in here

CREDIT CARD #:		EXP. DATE:	AMOUNT DUE:
----------------	--	------------	-------------

ELECTRONIC RECEIPT WILL BE SENT FROM COCOEH@CCHEALTH.ORG

PAYMENT INFO RECEIVED BY: PHONE
 FAX
 E-MAIL
 WALK-IN
 MAILED IN

SIGNATURE OF CARDHOLDER:	DATE:
--------------------------	-------

OFFICE USE ONLY

AR#:	FA#:	XR#:	PROCESSED BY:
------	------	------	---------------