

The Lowell Women's Club and Lowell Recreation Department proudly
present the 7th Annual Lowell Freedom Festival

Food Vendor Application

Saturday, May 19, 2012

11:00am – 10:00pm (see participation times below)

Harold Rankin Park-Main Street Lowell, NC

Registration Fee: \$65.00

Your Name: _____

Company Name: _____

Address: _____

Phone Number: _____

Email: _____

Type of food at your booth: _____

Please check your participation:

I will be at the festival 11:00am to 10:00pm

I will be at the festival 11:00am to 5:00pm

- Outdoor booth space is 10'x10'. **You are responsible for supplying tents, tables, and chairs. See below for additional optional services.**
- **Cancellation Policy:**
 - Full refunds will be processed on cancellations received no later than April 6, 2012.
 - Cancellations received after April 6, 2012 will be subject to a \$10.00 handling fee.
 - No refund will be processed on cancellations received after May 11, 2012.
 - No refunds will be issued due to inclement weather on the day of the festival.
- All booth space applications are reviewed by The Lowell Recreation Department and The Lowell Women's Club to determine acceptance to the festival. If your application is rejected, your money will be fully refunded prior to May 11, 2012.
- **A mandatory Gaston County Application for Temporary Food Establishment Permit must be sent along with your application by May 4, 2012 – NO EXCEPTIONS.** The Gaston County Environmental Health Division may require you to pay a \$75.00 "Temporary Food Establishment" permit fee. The Gaston County Environmental Health Division will contact you to pay this fee. ****THE HEALTH DEPARTMENT REQUIRES YOU TO FILL OUT THIS FORM EVEN IF YOU SELL PRE-PACKAGED FOOD!**
- Booth and festival information will be sent to you via email no later than May 14, 2012. If you need information before then, call 704-661-2015 or 704-913-2910 or email lowellwomensclub@hotmail.com
- Set up hours are:
 - 7:00am to 10:30pm May 19, 2012.
 - Your exhibit area must be cleaned and cleared by 11:00pm on May 19, 2012.

By signing below, you agree to all of the above information and to release The City of Lowell, The Lowell Recreation Department, and The Lowell Women's Club from any claims for damages, injuries or loss suffered by you or anyone participating with you as a result of participation in the 2012 Lowell Freedom Festival event and waive any claim that you or anyone participating with you might have against the above sponsors for damages arising out of, or in any way relating to, your participation in this event.

***Any forms unsigned will be returned to you along with your check.**

Signature: _____

Print Name: _____

Payment Checklist and Optional Services:

10 x 10 Booth Space \$65.00 Booth Size needed _____ Total _____

Power supply \$30.00
Due to safety concerns, this is preferred over individual generators. _____

Water \$5.00
You will need your own portable container. _____

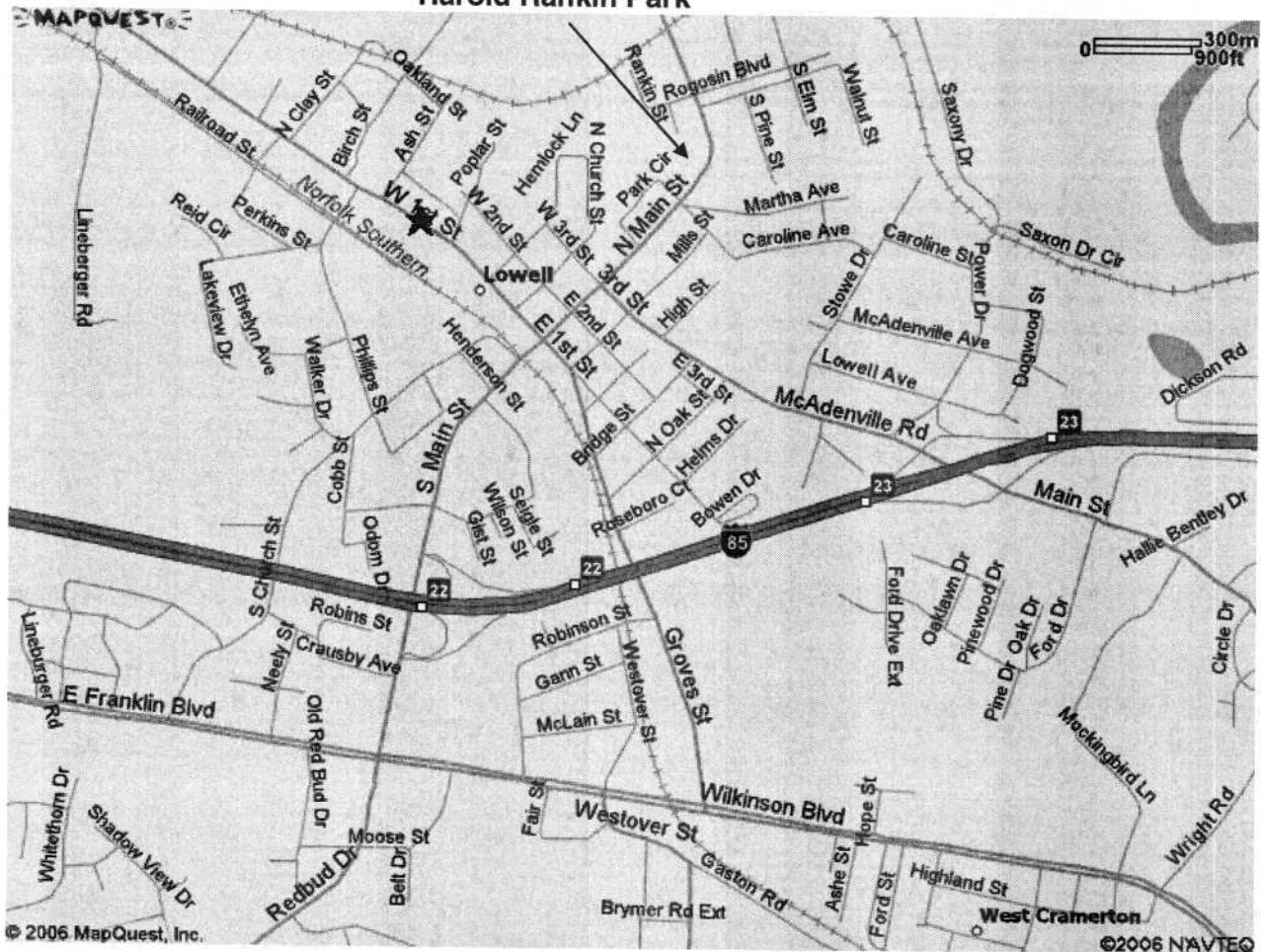
Bagged Ice \$4.00 Total Bags Needed _____ Total _____
5# bags of ice are available on a pre-order basis.

Grand Total _____
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- Registrations must be received no later than May 4, 2012. Make checks payable to The Lowell Women's Club. Our mailing address is:
The Lowell Women's Club
4020 River Falls Dr.
Lowell, NC 28098

See attached pages for the Temporary Food Establishment Permit.

Harold Rankin Park





Curtis Hopper, R.S.
Administrator

Gaston County Environmental Health

991 West Hudson Boulevard • Gastonia, North Carolina 28052
Phone (704) 853-5200 • Fax (704) 853-5231 • www.gastonpublichealth.org

APPLICATION FOR A TEMPORARY FOOD ESTABLISHMENT VENDOR PERMIT

Each vendor must submit a **completed** Temporary Food Establishment (TFE) Permit Application to the Coordinator of the event they are participating in. Once vendor applications are received from event coordinators, the applications will be reviewed by Gaston County Environmental Services, at which time those vendors needing to submit a payment of \$75 for a TFE permit will be notified. **The permit fee is Non-Refundable and must be received prior to your participation for each event.**
Incomplete applications may not be processed.

Application submission date: _____ Non-Profit Tax I.D.# _____

1. Name of event: _____
2. Location of event: _____
3. Date(s) of event: _____ To _____ Time(s) _____ To _____
4. Booth Name/Business name: _____
5. Owner/Operator name: _____
6. Owner/Operator address: _____

Address	City	State	Zip
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7. Applicant's telephone number: _____

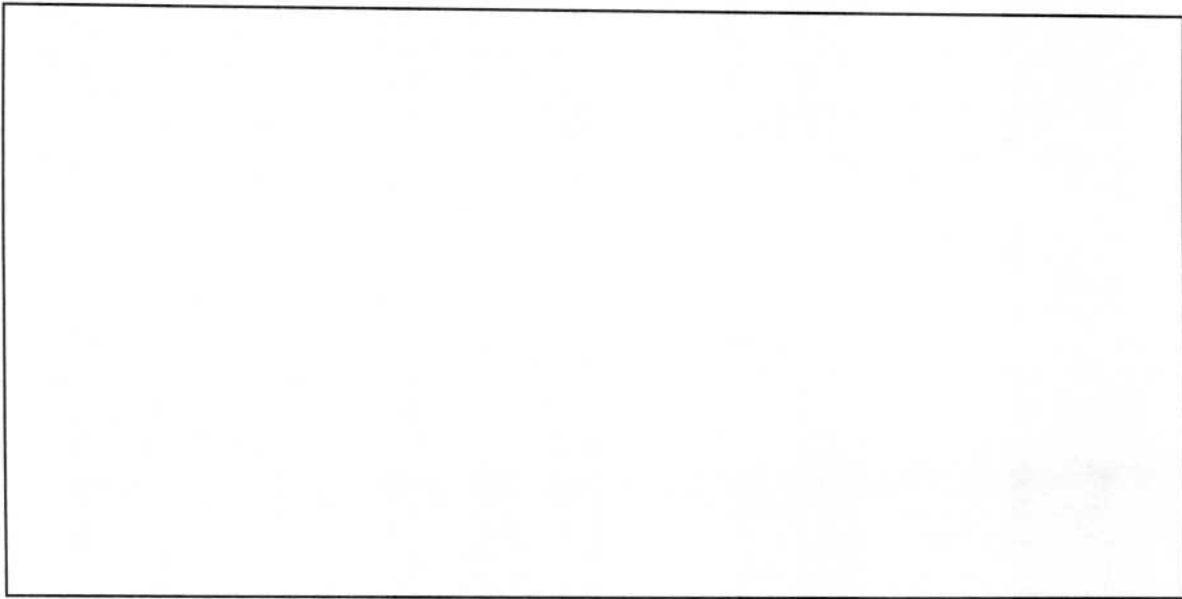
8 am – 5 pm	Cell/Other
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 E-mail address: _____
8. Proposed date/time for pre-opening inspection: _____
9. Indicate type of set up: () Tent Size ____x____ () Self contained unit (eg. Mobile trailer)
10. List all food and beverage items that will be served: _____

11. Will **all** foods/beverages be prepared at the temporary food establishment? Yes _____ No _____
 If no, attach a **written agreement** (signed by the owner of a North Carolina permitted food establishment) giving you permission to use the kitchen. Agreement must have listed items that will be prepared in the kitchen. Domestic kitchens cannot be used.
12. How will food temperatures be maintained during transporting to site? Cold: _____
 _____ Hot: _____
13. Describe equipment to be used at the event for:
 a. Cooking/Reheating _____
 b. Cold Holding _____
 c. Hot Holding _____
14. Handwashing: () Plumbed sink () Gravity flow with pushbutton/twist nozzle
15. Utensil washing: () Plumbed utility sink with drainboard/countertop space for air-drying
 () Utility sink with gravity flow (pushbutton/twist nozzle) with drainboard/countertop space for air-drying

16. Water source: () On-site Municipal () Sealed bottled water () Brought from permitted North Carolina food establishment - Name of Establishment/Phone number: _____
17. Wastewater disposal: () Provided by Event () Taken to permitted North Carolina food establishment. Name of establishment/Phone number: _____
18. Toilet facilities: () Public Building () Chemical Toilets (Porta-Johns) () Other _____
19. Garbage disposal: () Can collected on-site () Dumpster () Other _____

EQUIPMENT LAYOUT DIAGRAM: Identify all equipment including cooking and cold holding equipment, handwashing facilities, work tables, utensil washing facilities, food and single service storage, sneezeguards, and customer service areas (condiment tables). **Application will be returned if this section is not filled out completely.**



I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior consultation with Gaston County Environmental Services may nullify final approval and prevent issuance of a temporary food establishment permit. **I understand that incomplete/incorrect applications may not be processed and is not guaranteed when submitted less than 15 days prior to the event. Temporary Food Vendor Permit Fees are Non-Refundable.**

Signature: _____ Date: _____
(Owner/Operator or designee)

Approval of these plans and specifications by this Department does not indicate compliance with any other code, law or regulation that may be required (i.e., federal, state, or local). A pre-opening inspection (with electricity and equipment in place) will be necessary to determine compliance with the 15A NCAC 18A .2635 temporary foodservice establishments and to determine whether a permit will be issued.

Return completed application to the coordinator of the event you are participating in. Coordinators of events are responsible for mailing all Temporary Food Establishment applications to Gaston County Environmental Services, Plan Review Section, 991 West Hudson Blvd., Gastonia, N.C., 28052, by fax (704) 853-5231, by email to shawn.blackmon@co.gaston.nc.us. For more information you may contact Shawn Blackmon at (704) 853-5214.

Approved: _____ Date: _____

TEMPORARY FOOD ESTABLISHMENT
VENDOR CHECKLIST

*****This list should not be returned with application.
This information is intended to assist you with your set up.*****

DATE _____ BOOTH # _____

- food from approved sources and identified
- clean location and equipment
- food covered and protected (barrier to shield food from the public)
- utensils and equipment protected (clean and covered)
- effective measures taken for fly control (i.e. fans, screens)
- potable running water under pressure
- ability to heat water
- utensil sink with drain boards or counter space large enough to accommodate largest utensil (i.e. pots, skewers, racks, spoons, etc.)
- approved employee hand-washing facilities / hand soap / paper towels
- refrigeration: 45°F or less with accurate air thermometer
- properly mixed sanitizer (50 to 100ppm chlorine) in a labeled spray bottle for use on all clean food-contact surfaces
- sanitizer test strips
- metal stem-type food thermometer accurate to $\pm 2^\circ\text{F}$ (0-220°F)
- approved garbage disposal method
- single-service items (cups, forks) properly stored
- single-service cup dispensers or original packaging (plastic sleeves)
- approved food-grade hose for potable water connections
- sewer connection leading to proper location (not a storm drain)

These conditions must be met to obtain a food-handling permit

Be prepared to discuss the following during permitting:

Will other food prep locations on or off the fairgrounds be used? (i.e. restaurants, caterers, trailers)
Is there adequate refrigeration? How and where will food be thawed? How will food be cooked?
What is your method for holding food hot and/or cold?