

## Temporary Food Service Establishment (TFE) Application

Barry County Health Department  
P.O. Box 207  
Cassville, MO 65625  
417-847-2114 FAX 417-847-2116  
www.barrycountyhealth.com  
FEE: \$20.00



A. Operator Information			
Name of Temporary Food Establishment (TFE)			
Name of Owner/Operator			
Mailing Address			
City	State	Zip Code	
Phone No. (   )		Alternative Phone No. (   )	
B. Event Information			
Proposed TFE Location (Number, Street, City)			
Name of Event			
Operation Starts Date                      Time		Operation Ends Date                      Time	
Coordinator of Event		Phone No. (   )	
C. Facility & Operations Information			
1. Will ALL foods be prepared at the TFE site? <b>YES</b> <b>NO</b> If No please provide the name and address of the location where foods will be prepared. <b>Home Prepared Food Is NOT Allowed.</b>			
2. Describe (be specific) how, frozen, cold, and hot foods will be transported to the TFE.			
3. How will food temperatures be monitored during the event?			
4. Describe the location and set up of hand washing facilities to be used by the TFE workers.			
5. Identify the source of the potable water supply serving your TFE. Describe how it is to be supplied (RV hose, cooler container, etc.)			
6. Will there be electricity provided to the TFE?			

C. Facility & Operations Information (continued)							
7.	Describe how food will be protected during display/ service from insects, dust consumers. Describe how food will be protected from weather.						
8.	Describe where utensil washing will take place. Describe the equipment and procedures you will use to wash, rinse, sanitize and air dry equipment, utensils and other food preparation surfaces.						
9.	List the type of sanitizer for food contact surfaces you will use (a test kit will be provided if needed)						
10.	Describe how and where wastewater from utensil and hand washing will be collected, stored and disposed.						
11.	How will cleaners and other chemicals be stored in relation to food supplies and utensils?						
12.	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">Toilet Facilities</td> <td style="width: 33%; border: none; text-align: center;"><b>Flush</b></td> <td style="width: 33%; border: none; text-align: right;"><b>Portable</b></td> </tr> <tr> <td colspan="3" style="border: none;">What type of hand washing facilities is provided for these facilities?</td> </tr> </table>	Toilet Facilities	<b>Flush</b>	<b>Portable</b>	What type of hand washing facilities is provided for these facilities?		
Toilet Facilities	<b>Flush</b>	<b>Portable</b>					
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13.	Describe the number, location, and types of garbage disposal containers in the TFE.						

How and where will foods be thawed, cooled, and reheated.

**F. Drawing**

Provide a drawing of the TFE. Identify and describe all equipment (including cooking and cold holding equipment), hand washing facilities, food and single service storage, garbage containers, equipment for customer self service and dispensing condiments.

I have received a copy of the "Temporary Food Establishment Operations Check List"

Applicant's Signature

Date of Submission