



Public Health
Prevent. Promote. Protect.

Taney County
Health Department
320 Rinehart Road
Branson, MO 65616
Tele: 417-334-4544 - Fax: 417-336-9604

Temporary Food Service Operator Application

(Each Food Booth Operator Must Provide the Following Information)

By providing the information below, you will assist in identifying and preventing potential public health problems that might occur during your temporary food event. A separate Temporary Food Service Operator Application must be submitted to the Taney County Health Dept. by each food service vendor at least 10 working days along with the \$50.00 application fee prior to the event. For more information, call 417-334-4544.

1. Event Name: _____
2. Event Location: _____
3. Dates/time of operation: Begin date: _____ Begin time: _____
End date: _____ End time: _____
4. Your organization/business name: _____
5. Applicants name: _____ E-mail: _____
6. Applicants address: _____
Street number and name City State Zip
7. Applicants Phone: (Daytime) _____ Evening: _____ Cell: _____
Fax: _____ E-mail: _____ Other: _____
8. Event Coordinator/Contact name: _____ Phone: _____
9. Number of Certified Food Managers: _____ **Attach copy(ies) of certificate(s)**
10. All food and beverage must be prepared on-site or in an approved kitchen (not a home kitchen or motel room). Provide the name and address of the advance preparation facility and dates and times it will be used. **Attach copy of current Health Permit.**
Facility name: _____
Address: _____
Date and time of advance preparation: _____
11. Indicate the distance and time for transporting food or beverage to the food service site.
Distance: _____ Time: _____
12. How will food temperatures be maintained during transportation? _____
13. Structure for temporary kitchen: Tent with sides Trailer Other
If other, Describe: _____
14. Type floor provided: Concrete Asphalt Wood Other
If other, Describe: _____
15. Describe equipment to be used at the event for:
 - a.) Cold holding _____
Will there be a refrigerated food storage truck on site? Yes No
 - b.) Hot holding _____
 - c.) Cooking _____
 - d.) Reheating _____
 - e.) Grilling/BBQ _____
 - f.) Utensil washing _____
 - g.) Handwashing _____
 - h.) Sneeze guards _____

16. Water/ice source: On-site municipal supply Holding tank Other
If other, Describe: _____

Holding tanks should be empty on arrival and sanitized prior to filling with City of Branson water. A water sample for coliforms will be taken 24 hours before event begins.

17. Backflow preventer on water connection provided? Yes No

18. How will hot water (110F) be provided for handwashing and utensil washing? _____

19. Describe liquid waste/grease disposal method: _____

20. Describe means of garbage disposal: _____

21. Energy supply: Electricity Propane Other If other, describe: _____

22. **Statement From Applicant:** I certify the information in this application is complete and accurate. I understand the COBHD (City of Branson Health Department) does not provide verbal approval of plans or for deviation from approved plans, and that any deviation from the plans and procedures in this application without prior written permission from the COBHD may nullify final approval and result in my not being able to operate the day of the event.

Signature: _____ Date: _____

THIS SECTION IS FOR USE BY TANEY COUNTY HEALTH DEPARTMENT STAFF
Approval of these plans and specifications by the Taney County Health Department does not indicate compliance with any other code, law or regulation that may be required – federal, state, or local. It further does not constitute endorsement or acceptance of the completed establishment (structure or equipment). A pre-opening inspection of the establishment with equipment in place and operational will be necessary to determine if it complies with the local rules governing food service establishments.
Plan Approved By: _____ Date: _____ Vendor No.: _____
EPHS Comments: _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____

EQUIPMENT LAYOUT

Draw in the location and identify all equipment including handwashing facilities, dishwashing facilities, ranges, refrigerator, hot and cold holding equipment, worktables, food/single service storage, grills, etc. Indicate how you will protect food and utensils from flies, dust, dirt, etc.

A large rectangular grid for drawing equipment layout. The grid is composed of 12 columns and 12 rows of squares, defined by dashed lines. The grid is intended for drawing and identifying the location of various pieces of equipment for a temporary food service operation.