

MAIN OFFICE:

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SPECIAL EVENTS - FOOD VENDOR APPLICATION

Under Section 16(2) of the Health Protection and Promotion Act, every person who intends to commence to operate a food premises shall give notice of the person's intention to the Medical Officer of Health of the Health Unit in which the food Premises will be located. Please submit a completed form to the Health Unit within 10 working days prior to the event to allow adequate time for processing. Failure to be in compliance with the Food Premises Regulation may result in closure of your premises.

Name of Concession:		
Name of Event:	Event Dates:	
Location:		
Contact Person:	Phone No.:	
Contact Address:	City:	
Postal Code:	Email:	Fax No.:

MENU ITEMS:
Food Suppliers:
Location of Food Preparation:
Number of Certified Food Handlers:

Type of Food Facility:
Fixed Premises Mobile Preparation Premises
Other: (Explain)
Potable Water Source: Municipal Well Water Holding Tanks
Sinks Provided with hot and cold running water under pressure:
3 compartment 2 compartment Handwash basin
Waste Water Disposal: Septic System Holding tank Disposal site
Cold Storage: Mechanical Insulated containers with Ice Other
Garbage: Receptacles Provided: Yes Disposal Method:

<p>Owners and operators have a responsibility to ensure compliance with the Smoke-Free Ontario Act 2017. (See sections 14 and 15).</p> <p>I understand that the information contained in this form may be provided to the Smoke-Free Ontario program to assist in compliance.</p>

I have received and read the Special Events information package provided and I accept responsibility for ensuring that the information that I have provided on this form is correct.

Print Name	Signature	Date
HEALTH UNIT INTERNAL USE ONLY		
EXEMPT UNDER REG. 493: Yes <input type="checkbox"/> No <input type="checkbox"/> APPROVED FOR EVENT: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Signature of Inspector: _____ Date: _____		
Inspector Comments: _____		