

MERRIMACK FIRE RESCUE

432 Daniel Webster Highway • Merrimack NH 03054 • (603) 420-1730



HEALTH DIVISION

TEMPORARY FOOD - EVENT COORDINATOR'S APPLICATION

The Coordinator is responsible for distributing and collecting ALL temporary food vendor applications, required associated documents and permit fees. All applications must be filled out completely, and submitted all together to be reviewed by the Health Officer, FOURTEEN (14) DAYS PRIOR TO THE EVENT. Vendors will be contacted directly if there are any questions regarding food applications.

Name of Event:				
Event Location:				
Date(s) of Event:) of Event: Hours of Operation:			
Expected Number of Patrons per Day:				
Event Coordinator Name:				
Phone: Email:				
Number of Food Vendors:	ndor List Document	must be attac	ched to application	
Time Food Vendors will be ready for inspection: Is the Event Coordinator providing one person Certified in Foo If yes, CFPM must be on site monitoring safe food handling practices & in No Yes, Name of the Person Certified:	d Protection Manage nitiating corrective action	ement to overs	see all food vendors sthroughout the even	
Facilities				
Restrooms: If permanent restrooms/handwashing facilities are not ava	ilable, portable facilities	s must be provid	ed	
Number of Restrooms provided]	Permanent:	Portable:	
Handwashing Sinks: Must be easily accessible (within 25 feet) to ven Hand soap, single-use towels, and trash receptate		•		
Number of Handwashing sinks:]	Permanent:	Portable:	
Will Electricity be provided to the Food Vendors?	,	Yes:	No:	
Will a Potable Water Supply be provided to the Food Vendors?		Yes:	No:	
Wastewater: May not be dumped onto the ground surface; into watery drains, but shall be collected and dumped into a receptacle or sink drain collection of wastewater or into a toilet directed to a sanitary sewer or Describe your plan for storage and disposal of wastewater.	n designated for the			
Describe your plan for the disposal of rubbish, garbage and grease	:			

TEMPORARY FOOD- EVENT COORDINATOR'S APPLICATION

	Temporary Event Diagram
Attach or u	se space provided below to provide a diagram of the event location set-up. Must show food vendor layout, toilet facilities, hand washing facilities, waste disposal, and any other essential layout information
	ibmission: The following must be submitted to the Merrimack Health Division Health Officer
	rary Food Event Coordinator Application
Tempo	rary Vendor List
Attach	ed or provided diagram of event location layout

Event Coordinators Signature

days prior to event

Title

Date

Health Officer: Erin Olson Email: eolson@merrimacknh.gov Phone: (603) 420-1730 Address: 432 DW Highway, Merrimack NH

Attached ALL COMPLETED Temporary Vendor Applications, including required supporting documents 14



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HEALTH DIVISION

Temporary Event: Food Vendor List

To be completed by Event Coordinator

NOTE: It may be possible to add vendors after submission of this form to the Health Division, provided the request is in adherence to the two-week minimum application submission requirement. Contact the Health Division for further assistance

	Vendor	Person in Charge	Email	Phone	Category
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15					

Temporary Event: Food Vendor ListTo be completed by Event Coordinator

Vendor	Person in Charge	Email	Phone	Category
16.				
17.				
18.				
20.				
21.				
22.				
23.				
24.				
25.				
26.				
27.				
28.				
29.				
30.				