

# **Benton County Health Department**

Environmental Health 4500 SW Research Way Corvallis, OR 97333 Main Line: 541-766-6841 • FAX: 541-766-6248 Health Department: 530 NW 27<sup>th</sup> Street, Corvallis OR 97333 • 541-766-6835 Developmental Disabilities: 541-766-6847 Telecommunications Relay Service: TTY 1-800-735-2900 • Website: www.co.benton.or.us/health

Person-Centered Behavioral & Physical Health Care Public Health & Prevention Regulatory and Population Health Health Management Services

## Operational Plan Review Procedure for Intermittent (30 day) or Seasonal (90 day) Temporary Restaurant Applications

Dear Applicant:

Under Oregon Revised Statute (ORS) 624, an Operational Plan Review is required before either an intermittent (30-day) or seasonal (90-day) temporary restaurant license may be issued. The purpose of the operational plan review is to ensure that both food managers and food employees are operating under the appropriate policies and procedures, have been trained and have the correct equipment available to prevent a foodborne disease outbreak.

### Step 1: Complete the Operational Plan Review application.

- This is a requirement for anyone wishing to obtain a seasonal (up to 90 days) or intermittent (up to 30 days) temporary restaurant license.
- Provided that there is no change in menu or location, an operational plan review is valid for one year from the date of approval.
- The operational plan review may be extended for one additional year at the discretion of Benton County Environmental Health.

Step 2: Complete either a seasonal or intermittent temporary restaurant license application.

- **"Intermittent temporary restaurant**" means an establishment:
  - (a) That operates temporarily at a specific location in connection with multiple public gatherings, entertainment events, food product promotions or other events, <u>at least two</u> of which are arranged for by different oversight organizations; and
  - (b) Where food is prepared or served for consumption by the public. The location must remain the same and the menu is not altered. This license expires after 30 days.
- "Seasonal temporary restaurant" means an establishment:
  - (a) That operates at a specific location in connection with multiple public gatherings, entertainment events, food product promotions or other events that are arranged for <u>by</u> <u>the same oversight organization</u>; and
  - (b) Where food is prepared or served for consumption by the public. The location remains the same and the menu is not altered. This license expires after 90 days.

# To speed up the process, please make sure to fill in all requested information. Incomplete applications will not be reviewed; please allow at least 10 days to complete this review.

Temporary restaurants that require advanced food preparation prior to the event must operate from a licensed restaurant. Otherwise, food must be prepared in the booth at the event site; under Oregon Food Rule, <u>no home preparation or storage is allowed.</u>

Once you have received approval for the operational plan review, an Environmental Health Specialist will perform an inspection at the event. Temporary restaurant guidelines and Oregon Food Rules can be found at: <u>http://www.co.benton.or.us/health/environmental\_health/licenses.php</u>. Please call Environmental Health at 541-766-6841 if you have any additional questions or need clarification.



# BENTON COUNTY HEALTH DEPARTMENT

**ENVIRONMENTAL HEALTH DIVISION** 

4500 SW Research Way • Corvallis, Oregon 97333 Phone: 541-766-6841 • Fax: 541-766-6248

Office Use Only:	
Date Received:	
Amount Paid:	
Payment Type:	
Receipt #:	
Clerk:	
EHS: Tin	

# **Operational Review for Temporary Events**

Intermittent (30 Day)	Seasonal (90 Day)	_
Vendor name		
DBA/booth name (if different)		
Name of event		
Event location/address		
Event contact name & phone #		
Event start date		Event end date
Hours of operation		
Contact person (person responsible a	t the event)	
Contact phone # (day of event)		
Owner name		
Day phone #		Evening phone #
Cell phone #:		Email
Mailing address (include city, state a	nd zip code)	
Person completing application:		
	Print Name	Signature

Submitting an incomplete or late application may delay the operational review and result in your application being denied. Please answer every question that applies to your food service operation. If you have questions as you complete the application, you may call Environmental Health at 541-766-6841.

### **Infrastructure Review**

### Hand Washing Facilities: check all that apply

- □ Temporary Handwashing Facility (THF) with a five-gallon water container(s) filled with warm water and equipped with a control valve with free following spigot, soap, paper towels, wastewater collection bucket and trash can.
- □ Handwashing sink plumbed with hot and cold water under pressure with mixing faucets, soap, paper towel dispenser or hand dryer and trash can. Location: \_\_\_\_\_
- □ Other, please describe in detail:

#### **Wastewater Disposal:** *check on that apply*

- □ Wastewater will be disposed of in a city/county sewer system. Location where wastewater will be disposed: \_\_\_\_\_
- $\Box$  Other, please describe in detail:

#### **Toilet Facility:** *check all that apply*

- □ Toilet facilities are connected to city/county sewer system. Location of toilet facility:
- □ Toilet facilities are connected to septic system. Location of toilet facility:

- □ Portable toilet facilities will be used. Location of toilet facility:
  - Name of company providing portable toilets
  - Phone number of company providing portable toilets \_\_\_\_\_
  - Frequency of service?
  - $\circ$   $\,$  Is a service contract available for review?  $\,$   $\,$   $\,$   $\,$  Yes  $\,$   $\,$   $\,$  No  $\,$

#### Potable Water Supply: check all that apply

- □ Water is obtained from a Public Water System (PWS). Name of PWS: \_\_\_\_\_
- □ Water is not obtained from a public water system. If not, provide proof from a certified water testing laboratory that testing has been done for the following:
  - Coliform and E. coli bacteria at least 60 days prior to the event in accordance with OAR 333-150 section 5-104.12(B);
  - One year prior to the event for nitrate in accordance with OAR 333-150 section 5-102.11(C) and (D) and 5-104.12(B); and
  - One arsenic test before beginning operation for the first time in accordance with OAR 333-150 section 5-102.11(C) and (D) and 5-104.12(B).

	Water hauling service. Name of Company:
	Address of Company: Phone number of Company:
	Other, please describe in detail:
Cleani	ing and Sanitizing of Utensils: utensils will be washed, rinsed, sanitized, and air dried using
Check	all that apply
	Commercial dish machine bearing the National Sanitation Foundation (NSF) mark.
	Make: Model Number:
	Commercial dish machine <b>not</b> bearing the National Sanitation Foundation (NSF) mark.
	Make: Model Number:
	Three compartment sink. Location of sink:
	Three portable bus tubs. Location of bus tubs:

### Menu Procedure Review

This section must be filled out by the operator and submitted prior to licensing or with the plan review application. Answer only the questions that apply to your facility. If a question does not apply, please mark with an (N/A) not applicable. Add documents or pages as needed to describe your operation. The Food Sanitation Rules OAR 333-150-0000 can be obtained at: <a href="http://www.healthoregon.org/foodsafety">www.healthoregon.org/foodsafety</a>.

- 1. Describe your current plan to exclude or restrict food workers who are sick or have infected cuts and/or lesions (2-201.12):
- 2. What information are you providing your employees about <u>not</u> working when ill (2-201.12)?
- 3. What information are you supplying your employees about handwashing requirements (2-301.14, 2-301.13, 2-301.12, and 2-301.15)?
- 4. Who will be your person(s) in charge (2-101.11)? Do they have a valid Oregon food handler card or have completed an Oregon approved Food Safety Manager Certification course?
- 5. Are you aware of the rule that requires a "knowledgeable" person to be present at all times of operation (2-102.11)? Yes\_\_\_\_ No\_\_\_\_

*Note: One way to meet this is to obtain certification in a Food Safety Program designed for food managers* <u>www.healthoregon.org/foodsafety</u>

6. List the types of food probe thermometers (0-220°F) that food handlers will be using and where the thermometers will be kept (4-302.12 & 4-203.11):

- 7. How do you calibrate your food probe thermometers and how often? Who is responsible for calibrating thermometers (4-502.11(B))?
- 8. How do you clean and sanitize your probe thermometer (4-602.11(4))?
- 9. What type of chemical sanitizer do you use (chlorine, quaternary ammonium, iodine) (4-501.114)?

At what concentration do you use this sanitizer?	
What type of test kit do you have (4-302.14)?	
When do you use your test kit (4-501.116)?	

- 10. Describe how cutting boards, counter tops, equipment and other food contact surfaces are cleaned and sanitized (4-603.15):
- 11. When does cleaning and sanitizing of these items need to occur (4-602.11)?
- 12. What is done with leftover food (Chapter 3-501)?
- 13. Will salads such as tuna, egg, chicken, macaroni, pasta and potato be prepared in your facility?
   Yes \_\_\_\_\_ No\_\_\_\_

If yes, will the ingredients be pre-chilled before being mixed or assembled?

Yes\_\_\_\_ No\_\_\_\_

- 14. Describe how you will handle ready-to-eat food to avoid bare hand contact? For example, will you use tongs, ladles, spatulas, or disposable gloves to prepare ready-to-eat food (2-103.11(K))?
- 15. Describe when and where produce will be washed prior to use (3-302.15 & 5-402.11):

Note: Under Oregon Rule, home storage and preparation of food is prohibited.

### **Food Preparation**

- 1. List food from animals that you will serve raw or partially cooked such as sushi, steak tartar and oyster shooters (3-603.11):
- 2. Shellfish shipping tags must be retained for at least 90 days. Where will you be storing shellfish shipping tags to maintain by chronological order and by event?
- 3. Are you planning on serving raw fish (sushi, lox, ceviche)? If so, you will need to provide the name of your supplier and documentation to show parasite destruction.
  (Each invoice received from the supplier shall state the specific fish by species that have been frozen to meet the parasite destruction requirements under 3-402.11)
- 4. List your food suppliers (Chapter 3, Section 2).

### Holding Food Temperatures Cold & Hot

(Chapter 3-501)

- 1. Refrigerated food must be maintained at 41°F or colder. How did you determine the amount of cold storage/holding you will need for your operation? How will you maintain safe temperatures (example: refrigerator, ice chests with ice) (4-301.11)?
- 2. How will you ensure that each cold-holding unit has a working thermometer and that the temperature is maintained at 41°F or colder (4-203.12, 4-204.112, 4-502.11)?
- 3. If ice is purchased, who is your supplier?
- 4. If you will be using ice for keeping food cold, such as in a salad bar, how will the food be stored in the ice? *Please check or describe:* 
  - ☐ Ice water bath will be used. Ice water will be at the same level as food. Food will be placed in small containers of one quart or less capacity.
  - $\Box$  Other method(s), please describe:

- 5. Describe your procedure for date marking of ready-to-eat potentially hazardous food items: Note: Potentially hazardous ready-to-eat food must be discarded within 7 days when cold holding at 41°F or less.
- 6. How will you store raw animal products to prevent contamination of ready-to-eat food (3-302.11)?
- 7. How and where will frozen food be thawed (3-501.13)? Note: When storing raw animal products above one another, their storage must be based on the final required cooking temperature of each animal product. The animal product with the lowest cooking temperature must be stored above other raw animal products that require a higher cooking temperature (e.g., raw fish above raw ground beef).
- 8. What type of equipment will you use for holding food hot? How will you ensure that food is at the required temperature throughout the day?
- 9. Describe how food temperatures (hot and cold) will be maintained while in transport? *Check all that apply:* 
  - I will be using National Sanitation Foundation (NSF) approved insulated hot and cold holding containers.
  - □ I will be using insulated hot and cold holding containers that either is not approved by NSF or I don't know.
  - $\Box$  Other method(s), please describe.

Note: Required holding temperatures and cooling requirements are listed in the "Food Safety: Your Self-Training Manual" or in the "Food Sanitation Rules." Both can be obtained from your local health department or at this website: <u>www.healthoregon.org/foodsafety</u>.

### FOOD PROCESSING STEPS (Critical Control Points)

1. Improper cooling and reheating of food can result in food-borne illness. Fill in each space for each item served/where you will buy the food. List ingredients of each menu item; indicate how each item is prepared and show how food is thawed, put together, cooked, held, etc. Please indicate the temperature at which you will cook/hold food and tell how you will handle food from raw to finished product.

, ,		
	FOOD REQUIRING COOLING AND REHEATING MAY BE PROHIBITED	

MENU ITEM	тнаж	COMBINE, CUT, MIX	PRE-COOKING STORAGE	COOK, BAKE, GRILL, BBQ	HOT-COLD HOLDING	COOLING	REHEAT	FOOD TRANSPORT
( <b>Example</b> ) Chicken bought at Thrift Foods.	Thawed in refrigerator at less than 41 degrees F.	Dipped in egg and seasoned flour.	Held in refrigerator at less than 41 degrees F. Egg stored at 41 degrees F.	Grilled to an inside temperature of 165 degrees F.	Held in roaster at 135 degrees F until served.	None	None	None
( <b>Example</b> ) Chili from Ron's	None	Canned Chili	Canned Chili	Cooked on stove to 165 degrees F.	Held in crock pot at 135 degrees F.	None, leftover thrown out.	None	None

2. How will food handlers know that the food has cooled from 135°F to 70°F within 2 hours and then from 70°F to 41°F within 4 hours?

### **Cooking/Reheating**

- 1. Describe how the food worker will know when raw animal products are fully cooked (3-401.11): *Note: Required cooking temperatures are listed in the "Food Safety: Your Self-Training Manual" or in the "Food Sanitation Rules." Both can be obtained from your local health department or at this website:* <u>www.healthoregon.org/foodsafety</u>.
- 2. How will the cook know that all parts of the food being reheated have reached at least 165°F for 15 seconds within 2 hours?
- 3. List type(s) of units used for reheating:

### **Self Service**

1.	Will you provide	self-service	food to your c	customers?	Yes	No
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2. How will you protect food in self-service areas from customer contamination? (3-306.11 & 3-306.13)

### Food Sanitation Rules / OAR 333-150-0000

1. Do you have a copy of the Food Sanitation Rules? Yes\_\_\_\_ No\_\_\_\_ *The rules are on-line at <u>www.healthoregon.org/foodsafety</u>. If you do not have access to the Internet, you can obtain a copy from the Local Public Health Authority.* 

2. Do you know how to locate specific information in the rules? Yes\_\_\_\_ No\_\_\_\_

### Statement

I hereby certify that the above information is correct and I fully understand that any deviation from the above without prior permission from this Health Regulatory Office may nullify final approval.

Signature(s) of owner(s) or responsible representative(s):

 Date:
 Date:
 Date:

Approval of these plans and specifications by the Benton County Health Department, Environmental Health Division does not indicate compliance with any other code, law or regulation that may be required: federal, state or local. We recommend that you contact the local city, fire and zoning officers for additional requirements.

## Notice of Understanding

I understand that the permit fee for an Intermittent or Seasonal Temporary Restaurant License is for one inspection only and I will be invoiced by Benton County Health Department, Environmental Health Division for additional fees if a re-inspection is required.

Signature: Date:

# Food Safety for a Temporary Event

### $\sqrt{\mbox{Hand}}$ wash set-up must be in food operation area

- Hand sanitizers or bleach dips do not replace hand washing.
- Free flowing water spout, warm water, soap, and paper towels must be present.

### $\sqrt{\mbox{Maintain}}$ ice to the level of the food product!

• For the duration of the event. (Overnight included).

### $\sqrt{}$ Cold food must be held at 41°f or below

• Check foods with thermometers.

### $\sqrt{}$ Hot foods must be held at 135°F or above!

• Keep utensils in hot foods.

### $\sqrt{\mathbf{Have}}$ a thermometer for checking food temperatures

- For checking, holding, and cooking temperatures.
- Calibrate regularly.

### $\sqrt{\text{Reheat foods to 165}^\circ\text{F}}$

• This is re-heating of foods previously prepared.

### $\sqrt{}$ No smoking, eating or drinking inside food preparation area

### $\sqrt{No}$ bare hand contact! Use utensils, tongs, etc.

• Bring extras!!

### $\sqrt{\mbox{Maintain}}$ a sanitizer bucket and store cloths in bucket

• Have test strips and maintain chlorine 50 to 100 ppm (1 teaspoon of bleach in 1 gallon of water).

### $\sqrt{\mathbf{Protect}}$ food during display or preparation

- Use sneeze shields covers.
- Lids and plastic wraps.
- Food stored off floor or ground.

## $\sqrt{\mbox{Wash}}$ and sanitize equipment and utensils

 Use an approved dishwasher, or wash, rinse & sanitize by use of a 3-tub system with drying rack or keep enough utensils to change out every 4 hours.

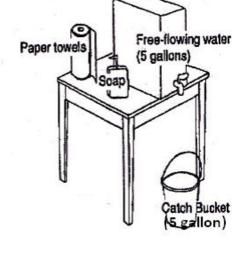
### $\sqrt{\mathbf{Food}}, \mathbf{water} \ \mathbf{\&} \ \mathbf{ice} \ \mathbf{must} \ \mathbf{come} \ \mathbf{from} \ \mathbf{an} \ \mathbf{approved} \ \mathbf{source}$

No homemade goods. (See rules for exceptions).

### $\sqrt{\mathbf{Food}}$ must be stored on site at the event or in an approved kitchen

Food may not be stored at home.

# $\sqrt{\mbox{Have}}$ a covered trash container



**Correct Handwashing Set-up** 

# **APPLICANT COPY** *Please keep for your records*

# **Temporary Food Service Checklist**

- Obtain and submit a completed application with the proper fee to Benton County Health Department, Environmental Health (application should be received 10 or more days before the event).
- For Benevolent (non-profit) organizations please provide a copy of your Letter of Determination showing Federal Tax exempt status along with your application and payment.
- \_\_\_\_\_ At least one food employee must have a valid Oregon Food Handler Card and be present during <u>all hours</u> of operation.
- \_\_\_\_\_ Must have proper hand washing facilities with warm water (minimum 5-gallon container with turn-spout), bucket (5-gallon), soap, paper towels and waste receptacle.
- \_\_\_\_\_ No smoking, eating or drinking in food booth.
- \_\_\_\_\_ No ill food workers.
- \_\_\_\_\_ Access to waste disposal facilities and toilets.
- \_\_\_\_\_ Adequate cooking facilities.
- \_\_\_\_\_ Adequate hot-cold holding equipment (e.g.; sternos, heat lamps, steam table, extra power, fuel, ice, insulated transport units).
- \_\_\_\_\_ Proper ice and food scoops with handles.
- \_\_\_\_\_ Extra buckets for fresh and waste water transport.
- \_\_\_\_\_ Extra sanitizer (such as chlorine bleach) and dish detergent (sanitizer test strips also recommended).
- \_\_\_\_\_ Cutting boards and work surfaces smooth and cleanable (hardwood cutting boards can be used, plastic covered tables).
- \_\_\_\_\_ Extra utensils provided (properly cleaned).
- \_\_\_\_\_ Maintain accurate hot food probe thermometer  $(0^{\circ}-220^{\circ}F)$
- \_\_\_\_\_ Spirit stem (liquid in a tube) thermometers for each cold hold unit.
- \_\_\_\_\_ Floor and overhead coverings for outdoor events as needed (fly screens or covers).
- \_\_\_\_\_ Food handler cards for each on duty supervisor.