CALVERT COUNTY HEALTH DEPARTMENT
Division of Environmental Health
P.O. Box 980
Prince Frederick, MD 20678
410-535-3922/301-855-1557
Fax# 410-535-5252
www.calverthealth.org

EXEMPT ORGANIZATION FOOD SERVICE NOTIFICATION TO OPERATE
Application is hereby made to operate a non profit food establishment in accordance with the Annotated Code of Maryland-Health General Article Governing Food Establishments. Notification of intent to operate must occur at least 14 days prior to the event date. THIS NOTIFICATION AND ACCOMPANYING SURVEY AND HACCP PLAN (HIGH AND MODERATE PRIORITY OPERATIONS ONLY) MUST BE SUBMITTED A MINIMUM OF 14 DAYS PRIOR TO THE EVENT DATE. NOTIFICATIONS RECEIVED LESS THAN 14 DAYS PRIOR TO THE EVENT DATE MAY BE DENIED. If you have submitted a HACCP plan to this office within the past 5 years and your menu has not changed, you are not required to resubmit the plan with each application.

PLEASE PRINT OR TYPE

I. Name of Organization: __________________________________________
   Physical Address: ________________________________________________
   Mailing Address: ________________________________________________
   Phone# ____________________ Owners Phone# ________________________
   Fax # ____________________ E-mail Address: _________________________
   Federal Tax ID# ____________________________
   Contact Person: _________________________________________________
   Owner of Organization: __________________________________________
   (Please Print)
   Owners Signature: ______________________________________________

II. Check Type of Establishment: (Check all that apply)
   Kitchen ______ Mobile Unit ______
   Temporary Event ______
   Water Supply: Public _____ Private _____
   Sewerage: Public _____ Private _____
   Other ____________________________ (Please Describe)

OFFICIAL USE ONLY: Date Approved: ______________ Approved By: ______________
III. Special Event (Name):

Location:

Date(s) and Time(s):

Menu:

Location of Food Preparation:

IV. Mobile Unit: Make ___________ Model ___________ Color ___________ Year ___________

Tag#: ______________________ Vin#: ______________________

Owner: ______________________ (Name, Address, Phone Number)

Special Markings: ______________________ (Names, Numbers Etc.)

Food to be Sold: ______________________

V. Source of Food: ______________________ (Name of Supplier, Grocery, Restaurant or Commercial Distributor)

Type of Food Service System: (Check all that apply)

______ Cook, Serve

______ Cook, Hot Hold, Serve

______ Cook, Chill, Reheat, Hold, Serve

______ Cold, Hold, Serve

______ Commercially Packaged Food Only

______ Other: ______________________
EXCLUDED ORGANIZATION FOOD ESTABLISHMENT SURVEY

Event Information

Name of Event: ____________________________________________

Event Start Date: ___________ End Date: ___________ Start Time: ___________ End Time: ___________

What date/time will the vendor be set-up and ready for inspection: ____________________________________________

What date/time will food preparation begin: ____________________________________________

*Adequate shielded or shatterproof lighting must be provided after dusk.

Operations

1.) Preparation of food will occur (Circle One): ON-SITE or OFF-SITE

If OFF-SITE, please attach a copy of the current food license and most recent Health Department inspection for the food establishment that the food preparation will be taking place at.

*Home Prepared and Home Stored Foods Are NOT Allowed, with exception of approved non-potentially hazardous baked goods for excluded organization fundraisers.

2.) Describe the method for transporting cold and/or hot food:

3.) List the methods used for cold holding and hot holding food during the event:

4.) Describe the set-up for warewashing and the type of sanitizer that will be used during the event:

5.) Provide the type of sanitizer that will be used for sanitizing buckets:

*Test strips must be provided to measure sanitizer concentration.
Please check the following items that will be provided during the event:

- Hair Restraints for all food staff
- Stem thermometer (digital or dial that reads temperatures in 2° increments ranging from 0° to 220°)
- Gloves for ready-to-eat foods
- Siding or screening for 3 of the 4 sides of the tent
- Cleaning bucket with soap and warm water for cleaning surfaces prior to sanitizing
- A potable water hose that is NSF approved or equivalent

Utilities

1.) What is the source of water used for hand washing, warewashing, and food preparation? (*Ensure proper backflow protection is provided if direct water connections will be used on-site.)

2.) What is the method of waste water disposal from hand washing and warewashing equipment?

3.) Who will be responsible for refuse disposal and how will refuse be stored on-site?

Provide a drawing of the SET UP/LAYOUT only if located off-site. Please include and label the following: location of hand washing station(s), dishwashing location, food preparation tables for ready-to-eat foods and raw meat products, all cooking equipment, and any self-service areas for customers. If a truck or trailer will be used for food storage please ensure that no food is stored on the floor and the area is available for inspection.
All food should be prepared and cooked at the event. Should any of the menu items served at the event be prepared off-site then please fill in the information below and provide a copy of the facility’s food license.

Name of Licensed Facility: ___________________________  Facility Phone #: ___________________________

Facility Address: ____________________________________________

Facility Contact Person: ___________________________  Facility License #: ___________________________

Below please list all the menu items that will be served during the event. All foods must be from an approved source and prepared at a licensed food service facility or onsite at the event. No food can be stored, prepared, or cooked at a private home. Should this form not be filled out or received incomplete this may delay the approval of your permit.

<table>
<thead>
<tr>
<th>Menu Item</th>
<th>Place of Preparation</th>
<th>Method of Cold Holding*</th>
<th>Method of Cooking**</th>
<th>Method of Hot Holding***</th>
<th>Method of Cooling (if applicable)</th>
<th>Method of Reheating (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ex. Chicken</td>
<td>Fairgrounds under tent</td>
<td>In cooler with ice at 41°F or less</td>
<td>On-site, grill with cover or fryer to a temperature of above 165°F</td>
<td>Chaffing pan or warming unit. Product held at 135°F or greater</td>
<td>N/A</td>
<td>N/A</td>
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</table>

See reverse side for more space and for proper temperatures
### Menu Item

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**Required temperatures according to COMAR 10.15.03**

*Cold Holding (minimum)*: All foods: 41°F or less; 45°F Shell Eggs & Shellfish; Pasteurized Crabmeat: 38°F

**Hot Holding (minimum)**: All foods: 135°F or greater

***Minimum Cook Temps**: SEE TEMPERATURE CONTROL CHART FOR ALL COOK TEMPERATURES

- Poultry: 165°F
- Ground Fish/Meats: 155°F
- Whole Meat/Pork/Seafood: 145°F
- Whole Roast: 130°F for 112 minutes

Cooling Process: All Foods: 135°F-70°F within first 2 hours then from 70°F-41°F within an additional 4 hours

Reheating Process: All Foods: 165°F within 2 hours
<table>
<thead>
<tr>
<th>FOOD</th>
<th>MINIMUM INTERNAL TEMPERATURE °F</th>
<th>HOLDING TIME AT SPECIFIED TEMPERATURE</th>
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</thead>
<tbody>
<tr>
<td>Shell eggs, Fish, meat, and all other potentially hazardous foods not specified in Chart 1.</td>
<td>145</td>
<td>15 seconds</td>
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<tr>
<td>Shell eggs not prepared for immediate service, ratites, comminuted fish and meats, game animals commercially raised for food, and injected meats.</td>
<td>145</td>
<td>3 minutes</td>
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<td>150</td>
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<td>or</td>
<td>158</td>
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<tr>
<td>Whole roasts (beef, corned beef, pork and cured pork roasts such as ham). Holding time may include post oven heat rise. Minimum oven temperature for roasts greater than 10 pounds is 250°F for dry heat. For roasts less than 10 pounds, minimum oven temperatures are 350°F for dry heat and 325°F for convection ovens. Oven temperature may be 250°F or less for high humidity cooking (relative humidity greater that 90 percent for at least 1 hour or in a moisture impermeable bag that provides 100 percent humidity).</td>
<td>130</td>
<td>112 minutes</td>
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<td>or</td>
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<td>Poultry; stuffed meat, pasta, or poultry, and exotic bird</td>
<td>165</td>
<td>15 seconds</td>
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<tr>
<td>Raw foods of animal origin cooked in a microwave oven.</td>
<td>165</td>
<td>Hold for 2 minutes after microwaving</td>
</tr>
<tr>
<td>Fruits and vegetables cooked for hot holding, ready-to-eat commercially processed foods, and hot holding.</td>
<td>135</td>
<td>None</td>
</tr>
<tr>
<td>Ready-to-eat commercially processed foods for immediate service.</td>
<td>None</td>
<td>None</td>
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</tbody>
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