



# MONO COUNTY HEALTH DEPARTMENT

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**Richard O. Johnson, M.D.**  
**Health Officer**

## EVENT FOOD FACILITY ORGANIZER PERMIT APPLICATION

Date of application \_\_\_\_\_

A site plan accompanying this application shall illustrate the following information:

- Location and name of each food facility
- Location and number of:
  - ~ Restrooms
  - ~ Hand-washing units
  - ~ Shared utensil-washing facilities
  - ~ Janitorial facilities
  - ~ Refuse containers

The applicant shall comply with the California Health and Safety Code Section 114381.1 Permit Requirements for Event Organizer. The application for this permit shall be submitted at least two weeks prior to the event. The event organizer permit fee is \$77/event.

Name of event \_\_\_\_\_ Date of event \_\_\_\_\_

Location of event \_\_\_\_\_

Event organizer \_\_\_\_\_

Mailing address \_\_\_\_\_

Phone number \_\_\_\_\_ Fax number \_\_\_\_\_

Estimated attendance \_\_\_\_\_ Total number of food booths \_\_\_\_\_

Number of hand-washing facilities \_\_\_\_\_ Number of portable toilets \_\_\_\_\_

Name of public water system providing water \_\_\_\_\_

Method of solid waste collection and disposal \_\_\_\_\_

I affirm that I am the person or representative of the organization stated above, and I agree that I am responsible for compliance with California Health and Safety Code Section 114381.1.

Signature \_\_\_\_\_ Date \_\_\_\_\_