



County of San Diego
DEPARTMENT OF ENVIRONMENTAL HEALTH AND QUALITY
FOOD AND HOUSING DIVISION
P. O. BOX 129261, SAN DIEGO, CA 92112-9261
PHONE: (858) 505-6809 FAX: (858) 999-8920
FHDTempEvents@sdcounty.ca.gov



TEMPORARY EVENT VENDOR PERMIT APPLICATION

CONTACT INFORMATION

Food Booth Name: <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>		Applicant Name: <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>	
Applicant Mailing Address (required): <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>		City, State (required): <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>	Zip (required): <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>
Applicant Email Address (required): <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>	Applicant Phone Number (required): <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>		Person in Charge Day of Event (required): <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>
Person in Charge Day of Event Email Address (required): <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>	Person in Charge Day of Event Cell Phone (required): <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>	Alternate Phone: <div style="background-color: yellow; height: 1.2em; width: 100%;"></div>	

We are committed to enhancing communication and services to our customers. In support of this effort, we are seeking information on the primary languages spoken by you and your staff. This information will allow FHD to continue to translate various applications and informational materials.

Preferred Language: ☐ Arabic ☐ Chinese – Cantonese ☐ Chinese – Mandarin ☐ English ☐ Farsi ☐ Filipino ☐ Japanese
☐ Karen ☐ Korean ☐ Somali ☐ Spanish ☐ Vietnamese ☐ Other _____

Preferred Secondary Language: ☐ Arabic ☐ Chinese – Cantonese ☐ Chinese – Mandarin ☐ English ☐ Farsi ☐ Filipino
☐ Japanese ☐ Karen ☐ Korean ☐ Somali ☐ Spanish ☐ Vietnamese ☐ Other _____

EVENT INFORMATION

(Applications missing information will not be processed. If applying for an annual permit, please include your first event's information below).

Temporary Event Name: Ocean Beach Street Fair & Chili Cook Off		Event Date(s) (Event Start Date if annual permit): June 22, 2024	
Event Location (Address): Foot of Newport Ave in grassy area adjacent to Veterans Plaza		City, State: San Diego, CA	Zip: 92107

ANNUAL VENDOR APPLICANTS MUST SUBMIT THE FOLLOWING WITH YOUR APPLICATION:

Applications that do not include the required documents below will not be processed.

- Copy of your Food Safety Manager certificate (if unpackaged/open food).
- Commissary Letter of Agreement (see Appendix B). If using an Out of County Commissary and traveling more than 30 minutes to the event, submit an SOP that includes food temperature control/monitoring, a copy of the commissary's health permit, and the most recent inspection report.
- [Processed Food Registration](#) (PFR) from the CA Department of Public Health (selling a prepackaged food product that you make and package for retail sale).

WAREWASHING FACILITY/FACILITIES

(For unpackaged vendors only).

☐ Self-Provided

☒ Organizer-Provided

☐ Agreement with food facility within 200 ft

(must complete Appendix A)

(# Unpackaged food vendors/8 = minimum # of 3 compartment sinks required, excluding mobile trucks).
Proof from the rental agency must be provided.

MENU

(List all food/beverage items, including toppings, garnishes, and prepackaged foods).

FOOD/BEVERAGE	HOW SERVED	MADE TO ORDER	PREP AT COMMISSARY	PREP AT EVENT	SAMPLING	DESCRIBE PREPARATION METHOD
Chili	<input checked="" type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	This is a contest. Samples will be provided to the judges and the public
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	
	<input type="checkbox"/> HOT <input type="checkbox"/> COLD	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	<input type="checkbox"/> YES	

FOOD PREPARATION STATEMENTS

As the Temporary Food Facility owner/operator, by initialing one of the following statements, you acknowledge that you understand your roles and responsibilities for food preparation during the event.

1	Single Event Vendors – I will not prepare food off-site. I acknowledge that all food preparation will be done on-site at the event.
2	Single Event Vendors – I will be preparing food off-site at the following permitted food facility: Name of Permitted Food Facility: _____ Health Permit Number (DEHXXX-FFPP-XXXXXX): _____
3	Annual Event Vendors – I acknowledge that any food preparation conducted off-site will be at my approved commissary location. I will complete and submit a Commissary Letter of Agreement .