



County of Santa Cruz



HEALTH SERVICES AGENCY

Environmental Health Division

701 Ocean St. Room 312, Santa Cruz, CA 95060

(831) 454-2022 TDD/ TTY: Call 711

www.scceh.org

EVENT ORGANIZER HEALTH PERMIT APPLICATION

- One-Time Year-Round Associated with a Certified Farmers Market

1. After signing, submit this application along with the current fee and the below attachments to Environmental Health Services at least 2 weeks prior to the event. Applications received less than 3 days from the event will not be accepted.
2. Attach a list of all food vendors and their contact information with this application.
3. Attach a site map that clearly shows the location of all food booths, and mobile food vendors, public restrooms, refuse containers, potable water supply faucets, all shared hand wash and ware wash facilities and waste water disposal facilities.

EVENT INFORMATION

Name of Event: _____

Location: _____

Event Date(s)/ Time(s): _____

Event Organizer(s): _____

Address of Organizer(s): _____

Organizer's Phone: _____

Total number of food booths/Mobile Food facilities: _____

Signature of Event Organizer	Print Name	Date
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For Office Use Only

Permit # _____ PE 1661/1662/1663 Dist. # _____ Record ID# _____

Single Event \$ _____ Year Round \$ _____ Cash/Check # _____ Check Date _____

APPROVED BY: _____ DATE: _____