

Rappahannock Area Health District
608 Jackson Street
Fredericksburg, Virginia 22401
Office (540) 899-4797
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OFFICES IN:
City of Fredericksburg
Caroline County
King George County
Spotsylvania County
Stafford County

State Fair 2010

Dear Food Vendor,

We look forward to your participation in this year's State Fair.

Application Deadline

To ensure the timely processing of your application, it must be received by the Rappahannock Area Health District no later than September 1, 2010. The required application for this event can be found in the *Exhibits and Concessions Manual*.

Permit Fees

In addition to the completed application, a \$20 permit fee must be submitted for each food establishment. The permit holder must pay for the first 5 temporary permits he or she acquires during the year (2010), up to a total of \$100 in fees per year. Additional fees will not be charged for temporary permits occurring later in the same calendar year in the Commonwealth of Virginia. However, to have those additional fees waived, the permit holder must retain and supply our office with copies of any health department receipts reflecting permit fees paid at the earlier events in the same calendar year. Checks or money orders should be made payable to the "Fredericksburg Health Department". A permit application must be submitted for each unit (i.e., tent, booth, etc.) that will operate at the fair. The permit fee or proof of previous payment must be attached to the application for permit.

Required Knowledge of Food Safety

The person in charge of the temporary restaurant facility must also demonstrate food safety knowledge by being a Certified Food Protection Manager (a copy of your certificate must be presented) or by correctly responding to the Environmental Health Specialist's questions as they relate to the specific food operation.

The Rappahannock Area Health District staff will be available on-site from 10:00 AM to 4:00 PM on Wednesday, September 22, and on Thursday from 9:00 AM to 4:00 PM in the designated health department office to administer the demonstration of knowledge exam to those persons who are not certified managers.

Inspections

Our staff will begin inspections on Wednesday morning for vendors who are certified or have demonstrated knowledge and are ready for inspection. You must sign in at the health department office and present your certification or pass the demonstration of knowledge exam prior to receiving an inspection. Inspections will be conducted on a first come first serve basis.

Please note: In accordance with state law, a temporary restaurant shall not begin preparing or serving foods until a permit is issued.

We look forward to working with you this year. If you have any questions, please do not hesitate to contact the Rappahannock Area Health District at (540) 899-4796.

Sincerely,

Donna Corrao
Office Services Specialist
Rappahannock Area Health District



VIRGINIA DEPARTMENT OF HEALTH
Rappahannock Area Health District
Application for Temporary Restaurant Permit for the 2010 State Fair

The local health department must be in receipt of the application by 4:30 PM September 1, 2010.

If applicable, \$20 permit fee or copy of payment receipt must accompany application.
A separate application is required for each location.
Please provide the following information. Failure to provide the necessary information regarding your operation will delay the processing of your application.

Please Print or Type Clearly

Date: _____

Name of the Organization/Individual: _____

Address: _____

Contact Person: _____

Telephone Numbers: (W) _____ (H) _____ (C) _____

Dates of Operation: _____ Operating Hours: _____ To: _____

Type of Food Facility: (Circle one) Booth Tent Mobile Unit Kitchen Other: _____

List all food suppliers: _____

List the equipment used to maintain hot foods at or above 135°F: _____

List the equipment used to maintain cold foods at or below 41°F: _____

Describe the equipment you will provide for hand washing: _____

How will condiments be served? _____

Describe the procedures you will use to wash, rinse, and sanitize equipment: _____

What method/methods will you use to avoid bare hand contact with ready to eat foods? _____

LIST ALL FOOD & BEVERAGE ITEMS BELOW (LIST ITEMS SEPARATELY)

FOOD/BEVERAGE	WHERE PREPARED	PREPARATION METHOD	EQUIPMENT USED
<i>Example: Hamburgers</i>	<i>On-site</i>	<i>Frozen patties placed on grill and cooked to an internal temperature of 155°F.</i>	<i>Gas grill</i>

Use the attached sheet should you have more food items than is provided in the space above.

You will be permitted to serve only the items you have listed on this application. Final approval will be determined by the inspector at the time of the inspection. **You may not operate the facility until a permit is received.**

I understand that failure to comply with the *Commonwealth of Virginia Board of Health Food Regulations* may result in a permit not being issued or permit suspension, as per 12 VAC 5-421-3870, *Commonwealth of Virginia Board of Health Food Regulations*, adopted January 1, 2010.

Operator _____ Date _____

Please mail application and fee to:

Fredericksburg Health Department
 Attn: Environmental Health
 608 Jackson Street, Suite 200
 Fredericksburg, VA 22401

Questions? Call (540)-899-4796 ext. 241

