

# Event Coordinator Application



All temporary and seasonal food establishments must be operated under the auspices of an event coordinator.

An event coordinator is required to complete an application verifying they are responsible for any shared facilities (e.g., toilet rooms, hand washing, utensil washing, refuse collection) for temporary food establishments as part of a temporary event.

For more information on the requirements of Event Coordinators review AMC 16.60.226

**\*\*\*The Event Coordinator Application is due at least two weeks prior to the event.\*\*\***

TYPE or PRINT IN INK. Enter N/A where requested information does not apply.

ORGANIZER INFORMATION	EVENT INFORMATION
Organizer/Coordinator DBA	Event Name:
Mailing Address:	Location:
City/State/Zip Code:	Address:
Event Organizer's Name:	City: <span style="float: right;">Will there be amplified sound? <input type="checkbox"/> Yes (Noise Permit Website) <input type="checkbox"/> No</span>
Event Organizer Contact Number:	Hours of Event (include time set-up will begin):
Type of Organization: <input type="checkbox"/> For Profit <input type="checkbox"/> Charitable - Not for Profit	Date(s) of Event: <span style="float: right;">Date Application Submitted:</span>
On-site Contact Person:  Email Address:	Food Vendor located <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor* * Event will occur regardless of the weather conditions: <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Food vendors are to be located in an area that will properly drain to control pooling water and mud and that will minimize exposure to blowing dust and debris.</b>
On-Site Contact Cell Phone:	(Size restrictions may apply) Anticipated Maximum Attendance at Peak Time: _____

An event coordinator permit will not be issued unless this application is complete and meets all applicable requirements found in AMC16.60 and the permit has been signed and approved by the regulatory authority. Additionally, the undersigned is aware the non-compliance may result in closure of the event and/or temporary food establishments.

Applicant Signature	Date
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Application Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	Date	Environmental Health Specialist
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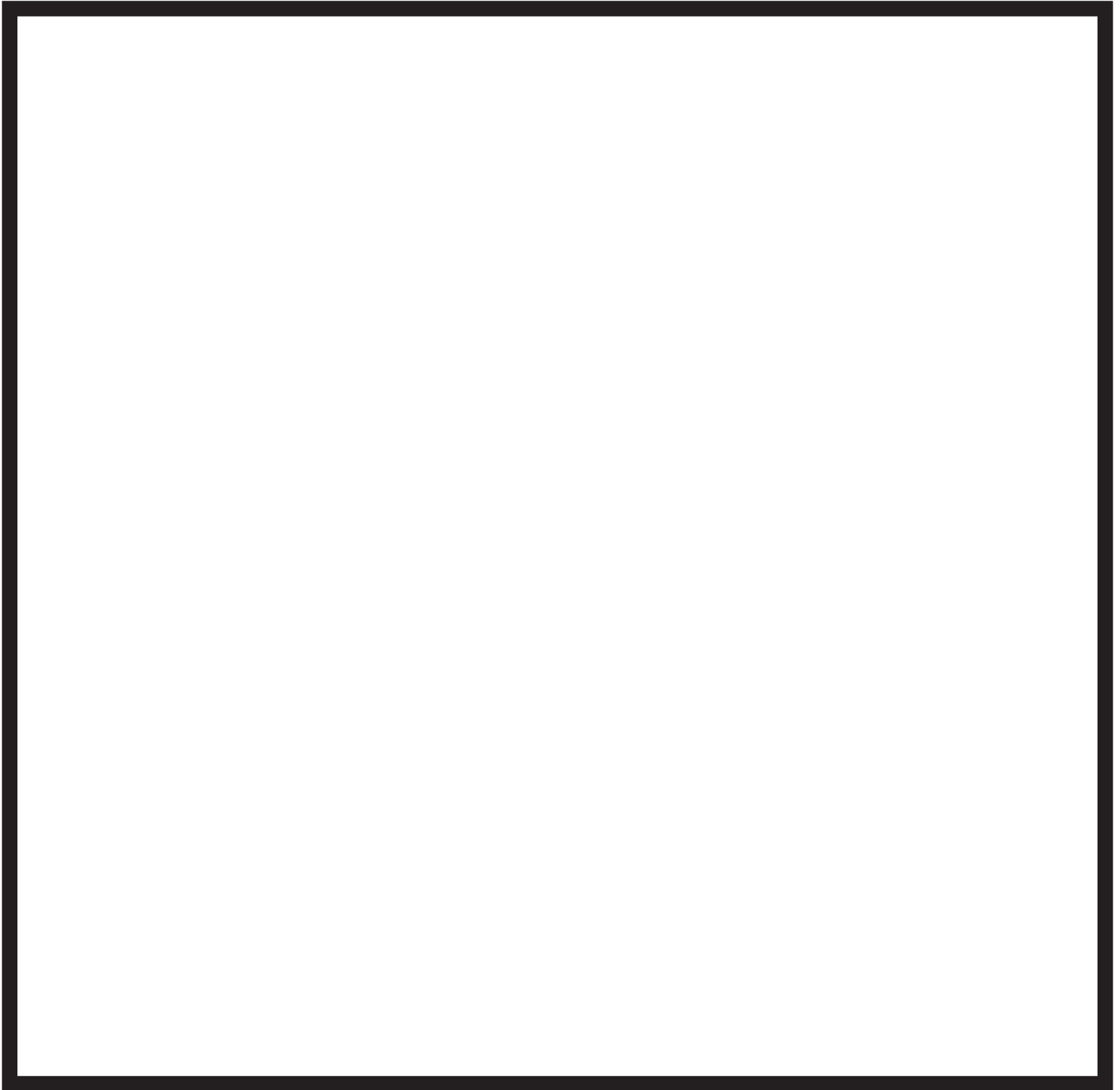
Restrictions or Reason for denial:

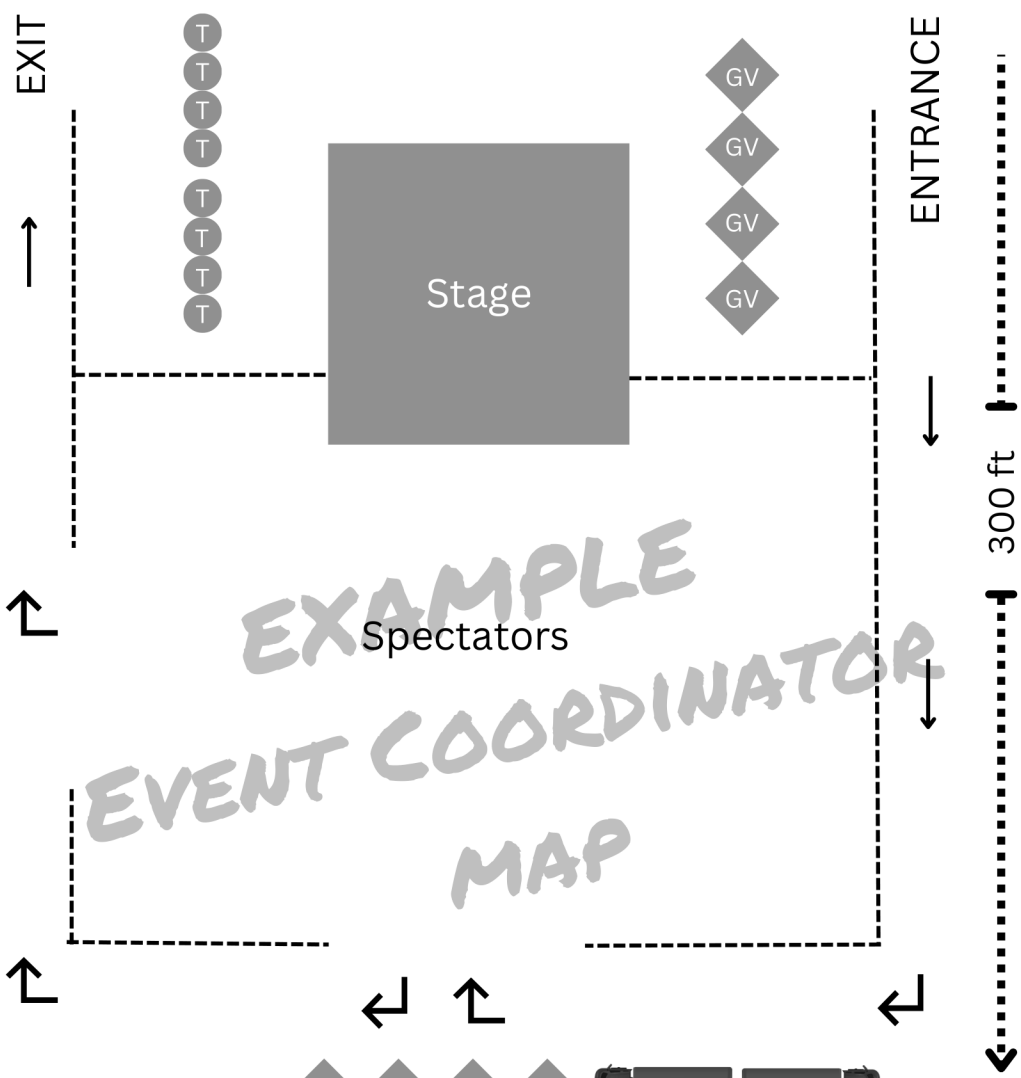


Sketch below a general layout of the Temporary Event including the following:

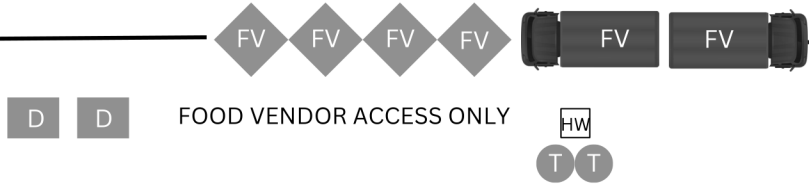
**Example provided on the back of this page.**

1. Temporary Food Establishments
2. Water supply
3. Toilet and handwashing facilities
4. Refuse disposal containers
5. Location of shared utensil-washing facilities
6. Refrigerated trailer, if provided
7. Location of animals, rides, attractions (include distance of TFE from all other facilities on plot plan)





EXAMPLE  
Spectators  
EVENT COORDINATOR  
MAP



FV = Food Vendor      GV = General Vendor  
 T = Toilet  
 HW = Hand Wash Station      ----- = Fencing  
 D = Dumpster