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FOR OFFICE USE ONLY	
Date:	_____
Amount Rec'd:	_____
Late Fee:	_____
Cash/Check/Credit/E-pay:	_____
Receipt No.:	_____
Permit No.:	_____

### Event Organizer Application - \$50.00

- Event Packet Checklist:
- Event Organizer Application
  - Temporary Food Establishment (TFE) or Special Event (SE) Applications for all food/beverage operations
  - Site map showing proposed locations of all TFE's/SE's, restrooms, garbage and wastewater disposal, etc.
  - Payment for all applicable permit fees
  - Event organizer to submit event packet to this department at least 2 weeks before the event
  - late fees shall apply to TFE/ SE applications received less than 2 weeks prior to the event

Organizer Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

On-site TFE/SE Coordinator: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Event Name: \_\_\_\_\_ Location: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Date(s) and Time(s) of Food Service: \_\_\_\_\_

**As the event organizer we will be responsible for providing the following for TFE's/SE's: check all that apply**

<input type="checkbox"/> <b>TFE/SE Booths:</b> Booth Rental Company: _____ * At minimum, a cleanable floor surface and overhead protection is required for all. Food/beverage operations. If open foods are handled, the booth must be fully enclosed with side walls. * Check with local Fire Dept. regarding approved food booth materials.	Waste Disposal: TFE's/SE's may not take their wastes with them thus the organizer must: <input type="checkbox"/> Provide garbage and trash dumpsters. <input type="checkbox"/> Provide liquid waste containers. <input type="checkbox"/> Use existing janitorial sink available for liquid waste disposal. <input type="checkbox"/> Provide grease waste containers. <input type="checkbox"/> Provide metal waste containers for spent charcoal
<b>Employee Restrooms:</b> Provide at least 1 toilet facility per 15 food employees within 200 feet of every food booth. Each toilet facility/structure shall be provided with hand washing facilities. <input type="checkbox"/> Provide portable toilet facilities and hand washing facilities (adjacent to toilet facilities) <input type="checkbox"/> Existing restroom structures available. Number of toilets provided for employees: _____	<b>Potable Water:</b> <input type="checkbox"/> City Municipal Water (no Reclaimed water). * Water hose shall be of food grade material - no garden hoses. <input type="checkbox"/> Commercially purchased bottled water. <input type="checkbox"/> Well water – submit satisfactory bacteriological water test prior to the event. <input type="checkbox"/> Commercial ice
<input type="checkbox"/> <b>Event Coordinator will notify all TFE's/SE's in regard to services which will not be provided for them at the Event.</b> <input type="checkbox"/> <b>Event Coordinator will notify WCHD of any vendor meetings</b>	Facilities available for common use (upon approval by this Department): <input type="checkbox"/> Refrigeration <input type="checkbox"/> Storage <input type="checkbox"/> Ware washing <input type="checkbox"/> Other

**Administrative Responsibilities for ALL Coordinators:**

- \* Make sure all permits to all TFE's/SE's are obtained and posted.
- \* Provide Requirements and Checklists to operators. Ensure all vendors adhere to Code requirements.
- \* Event Coordinator or Representative available onsite to conduct a walk-thru inspection with DEH Specialist the day of the event.

Site Map (may be provide on separate sheets.)

*The undersigned hereby applies for a Permit to operate (except events with only one food operation) and agrees to operate in accordance with all applicable state and local regulations, laws, and such inspection procedures necessary to ensure compliance. The undersigned is aware that non-compliance may result in closure of temporary food facilities. Re-inspections are subject to additional fees. Additionally, the undersigned agrees that the Organizer as noted above is responsible for all fees applied to the event's invoice.*

*Payment of applicable fees to secure valid permits is required before commencing or continuing operations. Failure to do so may result in permit suspension/revocation proceeding, and/or closure.*

Applicant Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

By typing your name in the above signature box, you are electronically signing this document.

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Reviewed By: \_\_\_\_\_  Approved  Missing Information Date: \_\_\_\_\_

Date Missing Information Provided: \_\_\_\_\_

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