



Special Event Vendor Application

Fax your completed form to
519-823-4905 or email it to
PHI.Intake@wdgpublichealth.ca at
least 30 days prior to the event.

Event Information

Event Name:	Duration:	1 day	2-3 days	4-7 days
Date(s) of Event:	Total Attendance:	Under 800	Over 800	
Event Location:	Annual Event:	Yes	No	

Vendor Information

Contact Name:	Business Name:
Address:	Phone:
City/Town: Postal Code:	Business Phone:
Email Address:	Website:

Are you an inspected business? Yes No * If Yes, please attach a copy of your last inspection report.

Food Handler Certified? Yes No *If yes, year certified: By what organization:

Personal Service Setting Booth (piercing, tattoo, manicure, etc.)? Yes No

Petting Zoo or Animal Exhibit? Yes No

Type of Vendor/Organization: Religious Organization* Fraternal Organization* Service Club*
Food Business Other (specify):

* If you are a religious organization, fraternal organization or service club and are accepting food from an uninspected facility (e.g. home), you must complete the Food Donor List for Exempt Special Events form.

Food Information

Food Menu	Source of Food
List ALL food to be prepared or served (If more space is needed, please attach a separate list.)	Name and address of grocer, caterer, restaurant (If more space is needed, please attach a separate list.) No home preparation permitted.
	Name:
	Address:
	Name:
	Address:
	Name:
	Address:
	Name:
	Address:

Food Handling & Storage

How will food be transported to the event?
Refrigerated truck Thermal unit (e.g., Cambro) Coolers with ice Insulated container/bag
Other (specify): _____

How will temperature be maintained on site?
Refrigerated truck Thermal unit (e.g., Cambro) Coolers with ice Insulated container/bag
Chafing dish Other (specify): _____

*A probe thermometer must be available on site to ensure proper internal food temperatures.

Describe your hand washing station:
Portable hand washing station Container with turn spout Other (specify): _____

* Liquid hand soap in a dispenser and paper towels must be available for use.

What sanitizer will be used:
 Chlorine bleach QUAT Iodine Other (specify): _____

Please provide a floor plan which includes (the floor plan can be hand drawn in the space below or attached to this application):

Two/three compartment sink	Hand washing station with soap in dispenser,
Food preparation areas	paper towel and waste water container
Food storage	Adequate refrigeration (include method of refrigeration)

Multiple Events

If you are attending more than one event in the Wellington-Dufferin-Guelph region, write the names of the events below. Application forms are not required for these events.

Event Name:	Event Name:
Event Name:	Event Name:

Vendor Signature: _____ Date: _____

For Office Use Only

CSR Number:	CID Notified: Yes No Date:
Inspector:	Inspection Required: Yes No
Premise Exempted: Yes No	
Comments:	
Date Reviewed:	PHI Signature:



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1-800-265-7293 ext. 4753
www.wdgpublichealth.ca

Special Events Checklist

Did you Forget Anything?

A. Handwashing

Warm running water in food-grade container with turn valve
Liquid soap in dispenser and paper towels
Catch basin for wastewater

B. Safe Food Handling

Adequate refrigeration/thermal container with ice freezer packs at a temperature of 4°C (40°F)
Adequate hot holding at a temperature of 60°C (140°F)
Probe thermometers (with means to sanitize probe in between uses) & refrigerator
Materials (e.g., plastic wrap, foil) for properly covering foods
Provisions to store food 15 cm (6 inches) off the ground
Separate cutting boards and utensils for raw and cooked foods
Single-use utensils for customers
Adequate sets of clean utensils (4 sets recommended per event day)
Ice container with a dedicated ice scoop (stored separately)

C. Sanitation

Bleach sanitizing solution (1 tsp. Bleach per 4 cups of water), quaternary compound or iodine available in buckets or labelled spray bottles
Supply of clean wiping cloths
Supply of clean utensils and equipment
An appropriate-sized garbage container with lid

D. Personal Hygiene

Hair covering/restraint (e.g., hairnet, cap, tied back)
Clean outer clothing

Questions? Call Wellington-Dufferin-Guelph Public Health at 1-800-265-7293 ext. 4753.