



# Certified Farmer's Market Madera County

## Vendor Health Permit Application (CFM-V) for Certified Farmer Booths

(Please complete all sides of the Application. Page 1 of 2)

Event #:	Invoice #:	Entered By:	Date:
<b><u>OWNER/OPERATOR INFORMATION</u></b>			
Owner/Operator Name: _____			
Business Address: _____		City: _____	ST: _____ Zip: _____
Mailing Address: _____		City: _____	ST: _____ Zip: _____
Home/Cell Phone: (     ) _____		Fax Phone: (     ) _____	
Email: _____			
<b><u>BUSINESS INFORMATION</u></b>			
Business Name ( <i>Please Print</i> ): _____			
<b><u>Certified Farmer's Market</u></b>			
<input type="checkbox"/> Certified Grower - Provide updated Certificate from Department of Agricultural ( <i>Madera County shall be listed</i> ).			
Will produce samples be provided? <input type="checkbox"/> No <input type="checkbox"/> Yes ( <i>see sampling requirements</i> )			
<input type="checkbox"/> Cottage Food Operator – Permit Number: _____ Issuing County: _____			
Will samples be provided? <input type="checkbox"/> No <input type="checkbox"/> Yes ( <i>see sampling requirements</i> )			
<b><u>EVENT INFORMATION</u></b>			
Name of Event: _____			
Event Address: _____		City: _____	ST: _____ Zip: _____
Circle operating day(s): <b>Mon Tues Wed Thurs Fri Sat Sun</b>			
Start Date: _____		End Date: _____	
Hours of operation: _____			
Organizer/Sponsor Name: _____		Organizer Phone: (     ) _____	

\*All fees paid in advance of the event. No money will be collected on-site. Permit fees are as per the most current fee schedule approved by the Board of Supervisors. Failure to comply with the above conditions may result in closure of the food vendor and/or additional fees. Applications and payments must be received by Madera County Environmental Health Division at least **14 working days** prior to the event date.

*I have read, understood, and will abide by the requirements for Sales of food from a Certified Farmers Market.*

Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_\_

## Vendor Health Permit Application for Certified Farmer Booths

**Please list all food items**

Name of Food Items <i>(attach pages if necessary)</i>	Source of Food Supplies <i>(Name &amp; Location of suppliers)</i>
1.	
2.	
3.	
4.	
5.	
6.	

**All certified growers shall provide a copy of their Certified Producer Certificate to this Division.**

### Required Equipment *(if applicable)*

<b>Cold Holding Temperatures</b> <i>(Transportation &amp; Onsite)</i>	<p>Potentially hazardous food samples shall be maintained at or below 45°F and shall be disposed of within two hours after cutting.</p> <p>All harvested, cut, wrapped, or otherwise processed meat, poultry, and fish products offered for sale shall be transported, stored, displayed, and maintained at a temperature of 41°F or colder.</p> <p>How is food kept <b>cold</b> during transportation to the event and onsite: _____</p>
<b>Produce Washing Facilities</b> <i>(for sampling)</i>	<p>Fresh, whole produce intended for sampling shall be washed or cleaned in another manner of any soil or other material by potable water in order that it is wholesome and safe for consumption.</p> <p>Provide details: _____</p>
<b>Handwashing Facilities</b> <i>(for sampling)</i>	<p><input type="checkbox"/> Plumbed sink. <i>(Cold and warm water provided)</i></p> <p><input type="checkbox"/> Gravity flow container with spigot/faucet to allow water flow with both hands free.</p> <p><i>As a minimum, you need 5 gallons of water in a container with a "hands free" spigot, a bucket to catch wastewater, a liquid or powder soap in a dispenser and paper towels.</i></p>
<b>Utensil Washing Facilities</b> <i>(for sampling)</i>	<p><input type="checkbox"/> All utensils and equipment must arrive at the event in clean and sanitary condition.</p> <p><input type="checkbox"/> A maximum of 4 booths may share one plumbed or portable 3-compartment sink with hot and cold running water. <i>(provide sanitizer test strips)</i></p> <p><input type="checkbox"/> Use of 3 separate 5 gallon dish tubs/buckets in each booth. <i>(provide sanitizer test strips)</i></p> <p><b>Sanitizer:</b>                      One (1) TBSP of bleach (5.25%) per gal. of water = <b>100ppm Chlorine</b>                      One (1) TBSP of quat ammonium (10%) per two (2) gal. of water = <b>200ppm Quat. Ammonium</b></p>
<b>Protection from Contamination</b> <i>(for sampling)</i>	<p><input type="checkbox"/> Samples shall be kept in clean, nonabsorbent, and covered containers intended by the manufacturer for use with foods.</p> <p><input type="checkbox"/> Any cutting or distribution of samples shall only occur under a tent, canopy, or other overhead covering.</p> <p><input type="checkbox"/> All food samples shall be distributed by the producer in a manner that is sanitary and in which each sample is distributed without the possibility of a consumer touching the remaining samples.</p> <p><input type="checkbox"/> Clean, disposable plastic gloves shall be used when cutting food samples.</p>

### Potable Water & Waste Disposal *(if applicable)*

Source of potable water provided by:	<input type="checkbox"/> Organizer <input type="checkbox"/> Other: _____
Location of waste disposal provided by:	<input type="checkbox"/> Organizer <input type="checkbox"/> Other: _____