



Event Coordinator Information Sheet

Required to be submitted at least fifteen (15) days prior to a scheduled event by the individual or group responsible for planning and coordinating an event at which three (3) or more vendors will be providing food and/or beverages to the public, i.e. craft fairs, farmers markets, festivals, fundraisers.

Public Health
Prevent. Promote. Protect.

Peoria City/County Health Department
Environmental Health
2116 N Sheridan Rd.
Peoria, Illinois 61604
309/679-6161
eh@peoriacounty.org
www.pcchd.org

Event Information

Name of Event: _____

Date/s of Event: _____

Event Hours: _____

Location of Event: _____

Number of Patrons Expected Daily: _____

Anticipated Number of Food and/or Beverage Vendors: _____

Event Coordinator Information

Name	Phone Number	Email Address

On-Site Contact Person and Phone Number (if different from above):

Name: _____ Cell Phone Number: _____

General Event Information

Each food and/or beverage vendor must submit a Temporary Food License Application with the appropriate fee to PCCHD at least five (5) business days prior to the day of the event. Late fees apply to all applications not received at least five (5) business days prior to the event. Temporary Food Event License Applications and rules can be found at <https://www.pcchd.org/149/Forms>.

Please note: Mobile Units or Multi-Event Temporary Food Service Establishment Vendors with valid Food Safety Licenses in Peoria County are required to submit notification of participation in the event, but do not have to submit a Temporary Food License Application. If the vendor is unsure whether they are licensed in Peoria County, it is the vendor's responsibility to inquire with the Peoria City County Health Department at EH@peoriacounty.org or by calling 309-679-6161.

The Peoria City/County Health Department provides food safety training for interested vendors at no cost. Contact us for more information!

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Event Site Description (check all that apply)

- 1. Water Supply:**
- There is access to potable public water taps on site.
 - There is access to potable private well water* on site.
 - Vendors must bring their own water supplies.

****if a well water supply is to be used, the results of the most recent water test must be submitted with this application.***

- 2. Wastewater*:**
- Direct hook up to sewage disposal system on site.
 - There will be liquid waste collection tanks on site.
 - Vendors must arrange for their own wastewater disposal.

****wastewater from handwashing sinks, etc. cannot be disposed of in storm sewers or on the surface of the ground.***

- 3. Electricity*:**
- Electricity will not be provided to each individual site.
 - Electricity will be provided to each individual site.

****vendors are required to have mechanical refrigeration to maintain time/temperature controlled for safety foods at 41 degrees F or below at all times.***

- 4. Trash/Refuse:**
- Trash receptacles will be provided for the public and vendors.
 - Dumpster will be provided on site for trash removal.
 - Vendors must arrange for their own trash removal.

- 5. Toilet Facilities:**
- Public restrooms with toilets and handwashing sinks will be available.
 - Portable toilets and portable handwashing units will be available.

How many toilets? _____

How many handwashing units? _____

****please refer to the Illinois Private Sewage Disposal Code Section 905.135 Portable Sanitation Part 4c for portable toilet and portable handwashing unit requirements.***

- 6. Other Services:**
- Refrigerated truck/s will be provided for use by vendors. If yes, how many? _____
 - A licensed kitchen is available on-site for use by vendors. If yes, Name of licensed kitchen: _____
List of equipment to be shared by vendors in licensed kitchen: _____

Other: _____

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Temporary Event Site Map

Use this area to draw a site map with food and/or beverage vendor locations or you may attach a map that includes this information. Include (at minimum): the locations of all food and/or beverage vendors, restrooms or portable toilets, dumpsters, refrigerated truck/s (if applicable), etc.

Event Coordinator Signature: _____ **Submission Date:** _____

Office Use Only (attach additional sheets for notes if needed)

Reviewer: _____ Date: _____

Notes: _____