

Office Use Only

Date Received: (yyyy/mm/dd) _____ Application # _____

- Applications from event organizers must be received at least 60 days before the event.
- Applications from vendors must be received at least 14 days before the event start date.
- Permits are NOT transferable to any person or business.
- Permits are issued for single events only

Note: The submission of an application with payment does not guarantee application approval.

Type of Application

New Application Amendment

If applicable, provide the previous: Permit # _____

Permit name _____

1 Applicant

If there is more than one applicant, attach a complete list of applicants with the information below. The first applicant listed will be considered the primary applicant for this project. You can also apply for your business number, food establishment permit and food hygiene training through the Access to Business portal at <http://novascotia.ca/mybusiness>.

Company/Organization _____

Business number (BN) if applicable _____

First name _____ Middle initial _____ Last name _____

Phone/fax Primary _____ Ext. _____ Secondary _____ Ext. _____ Fax _____

Email _____

Website/Social Media page(s) (if applicable) _____

Civic address _____

City/town Province Postal code Country

Mailing address _____

(if different than
civic address)

City/town Province Postal code Country

Preferred method of contact? Email Letter

2 Additional Contact Information

Is the Application Contact the same as Section 1? Yes No If yes, skip to Section 3.
 If there is more than one contact, attach a complete list of contacts with the information below.

First name _____ Middle initial _____ Last name _____

Contact title _____

Phone/fax Primary _____ Ext. _____ Secondary _____ Ext. _____ Fax _____

Email _____

Civic address _____

 City/town _____ Province _____ Postal code _____ Country _____

Mailing address _____
 (if different than civic address) _____
 City/town _____ Province _____ Postal code _____ Country _____

Return correspondence? Yes No
 Note: Following application decision, all correspondence will go to the applicant.

Preferred method of contact? Email Letter

3 Activity (Permit Type)

Choose one from below (all fees include HST).
 Enclose payment in the form of cash or a cheque or money order made payable to "Minister of Finance".

Type	Term of Permit	Fee
<input type="checkbox"/> Temporary Event Vendor Permit	1 day	\$24.18 + \$3.63 HST = \$27.81
<input type="checkbox"/> Temporary Event Vendor Permit	2–15 (consecutive) days	\$50.78 + \$7.62 HST = \$58.40
<input type="checkbox"/> Non-profit Temporary Event Vendor Permit	up to 15 (consecutive) days	no fee
Charity, purpose (must be filled in) _____		
<input type="checkbox"/> Temporary Event Organizer Permit		no fee

4 Temporary Event Site/Location

Temporary event name _____

Civic address _____

City/town

Province

Postal code

Country

Property Identification # (PID), if known _____

5 Temporary Event Permit Details

Temporary Event organizer/vendor operating name _____

Event Date(s) (yyyy/mm/dd) Event start date _____ Event end date _____

Intended hours of operation _____

Event Coordinator/ Name _____

Organizer Address _____

Phone _____ Email _____

6 Temporary Event Application Checklist

Supporting Documentation

This checklist and all supporting documentation is to be submitted with the application. However, additional information may be requested.

If supporting documentation is of poor quality or incomplete, the application may be delayed, returned or rejected.

6A Vendors Complete this Section

Answer all the following questions.

1. Have you submitted a list of all menu items to be served at your station? Yes No

2. a. Where will food for the event be prepared? (include address and Food Establishment Name)

b. Have you provided the "Permission to Use a Permitted/Approved Eating Establishment Form"?
(If required by Public Health Officer)

Yes No Not Applicable

3. a. Who will be preparing food for your station?

b. Have you provided a copy of valid Food Hygiene training for those preparing food for your station?
(If required by Public Health Officer)

Yes No Not Applicable

4. If transporting food for the event, how will food be transported, describe in detail.

5. Describe handwashing station set-up for your booth/station.

6. Describe dishwashing (how dishes and utensils will be washed).

7. Describe hot holding (if applicable).

8. Describe cooking (if applicable).

9. Describe food storage (if applicable).

10. a. Have you submitted a detailed floor/booth plan with your application? Yes No
- b. Check off that the detailed floor/booth plan includes the following details:
- location of all equipment including hot and cold holding equipment, dishwashing equipment (if required), and handwashing facilities
 - materials used for surfaces (floors, walls, ceiling, prep surfaces)
11. Provide any additional information you wish to convey as part of your application (optional).

6B – Organizers Complete this Section

Answer all the following questions.

1. a. Have you submitted a detailed site plan with the application? Yes No
- b. Check off that the detailed site plan includes the following details:
- location of all equipment including communal dishwashing equipment, handwashing sink(s), washroom facilities (either portable or part of a permanent structure)
 - materials used for surfaces (floors, walls, ceiling, prep surfaces)
 - vendor locations and what services are offer at each booth including handwashing sinks, dedicated dishwashing sinks, electrical service etc.
2. a. Is the proposed event site serviced by Municipal drinking water? Yes No
- b. If you answered “No” to 2.a. (above) have you submitted recent Bacterial Water Test Results? (Water results must be included for mobile units who source their water from a supply other than Municipal) Yes No
3. Have you provided a copy of valid Food Hygiene Training? (if required by Public Health Officer)
- Yes No Not Applicable
4. a. Are portable toilets available at the event site? Yes No
- b. Name of contractor _____
- c. Number of toilets available? For food handler use _____ For public use _____
5. a. Is hand washing available at the event site? Yes No
- b. For food handler use Yes No
- Describe _____

c. For public use Yes No

Describe _____

6. Is there solid waste disposal at the event site? Yes No

Describe _____

7. Is there a maintenance contract for the event site? Yes No

Describe _____

8. Provide any additional information you wish to convey as part of your application (optional).

7 Verify that the following submission items have been included with your application

Facility Type	Submitted	Waiver Requested - Reason
<p>Temporary Event Vendor</p> <p>List of products/menu to be sold at the event. Must include:</p> <ul style="list-style-type: none"> • All menu items being served at the temporary event • Source of menu items • Where foods are to be prepared and who is preparing the food. 	<input type="checkbox"/>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>Permission to Use a Permitted/Approved Eating Establishment Form (if required by Public Health Officer)</p>	<input type="checkbox"/>	<p>_____</p> <p>_____</p>
<p>Floor/Booth Floor Plan Must include:</p> <ul style="list-style-type: none"> • location of all equipment including hot and cold holding equipment, dishwashing equipment (if required), and handwashing facilities • materials used for surfaces (floors, walls, ceiling, prep surfaces) 	<input type="checkbox"/>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>Copy of Valid Food Hygiene Training (if required by Public Health Officer)</p>	<input type="checkbox"/>	<p>_____</p>

Facility Type	Submitted	Waiver Requested - Reason
Temporary Event Organizer	Detailed Site Plan Must include: • location of all equipment including communal dishwashing equipment, handwashing sink(s), washroom facilities (either portable or part of a permanent structure) • materials used for surfaces (floors, walls, ceiling, prep surfaces) • vendor locations and what services are offer at each booth including handwashing sinks, dedicated dishwashing sinks, electrical service etc.	<input type="checkbox"/> _____ _____ _____ _____ _____ _____ _____ _____
	Recent Bacterial Water Test Results (if on private supply)	<input type="checkbox"/> _____
	Copy of Valid Food Hygiene Training (if required by Public Health Officer)	<input type="checkbox"/> _____

8 Declaration

Information in this application package which the applicant considers to be confidential business information should be clearly identified.

Are you making this request? Yes No

If yes, indicate which information in the Supporting Documentation is considered confidential.

I acknowledge it is an offense under Section 94 of the Health Protection Act to provide false information, and confirm to the best of my knowledge and belief the information provided in this form and supporting documentation is true and accurate and complies with the relevant provisions of the Health Protection Act, and Food Safety Regulations.

Signature of Applicant _____ Date _____
(yyyy/mm/dd)

Name _____

or

I certify that I am acting with the applicant's full consent.

Signature _____ Date _____
(yyyy/mm/dd)

Name _____

9 Payment

Enclose payment (cash, cheque or money order) and return completed form to your local Nova Scotia Environment District Office.

- Enclosed is a cheque or money order made payable to **"Minister of Finance."**
- Enclosed cash

To locate the nearest NSE district office, visit our website at <https://novascotia.ca/nse/dept/regional-office-locations.asp>

Resources

To register for a food hygiene course <https://novascotia.ca/nse/food-protection/food-hygiene-course.asp>

Temporary Event Guidelines

<https://www.novascotia.ca/nse/food-protection/docs/Food-Safety-Guidelines-Temporary-Events.pdf>

Locate your PID

Nova Scotia Coordinate Referencing System Viewer – this site is free to use and requires you to identify your property through a street map or high resolution satellite imagery. You will have to click the property box in the Layers menu: <https://gis8.nsgc.gov.ns.ca/NSCRS/>

Visit our website at <http://novascotia.ca/nse/food-protection/> for further information on the Food Protection Program.