



**Division of Environmental Health**

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**SUPPLEMENTAL LIST OF COMMUNITY EVENTS**

**Booth Name:** \_\_\_\_\_

Please list the community events that you propose to operate at within your approved permit cycle in Humboldt County (note: this does not include the city of Ferndale or tribal land).

If you decide **to add events** later, please resubmit this page with the new events listed. Changes must be submitted 14 days prior to the event. Any changes made fewer than 14 days may not receive approval.

Name of Event: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Operation: \_\_\_\_\_ Food will be served from: \_\_\_\_\_  am  pm To: \_\_\_\_\_  am  pm

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

Location(s) of food preparation: \_\_\_\_\_ Date(s) of prep: \_\_\_\_\_

**FOR OFFICE USE ONLY**  Approved by Coordinator TE#: \_\_\_\_\_ BO#: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Operation: \_\_\_\_\_ Food will be served from: \_\_\_\_\_  am  pm To: \_\_\_\_\_  am  pm

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

Location(s) of food preparation: \_\_\_\_\_ Date(s) of prep: \_\_\_\_\_

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Event Coordinator: \_\_\_\_\_ Phone: \_\_\_\_\_

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

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**FOR OFFICE USE ONLY**  Approved by Coordinator TE#: \_\_\_\_\_ BO#: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Operation: \_\_\_\_\_ Food will be served from: \_\_\_\_\_  am  pm To: \_\_\_\_\_  am  pm

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

Location(s) of food preparation: \_\_\_\_\_ Date(s) of prep: \_\_\_\_\_

**FOR OFFICE USE ONLY**  Approved by Coordinator TE#: \_\_\_\_\_ BO#: \_\_\_\_\_

**Reviewed By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SUPPLEMENTAL LIST OF COMMUNITY EVENTS CONTINUED**

Name of Event: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Operation: \_\_\_\_\_ Food will be served from: \_\_\_\_\_  am  pm To: \_\_\_\_\_  am  pm

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

Location(s) of food preparation: \_\_\_\_\_ Date(s) of prep: \_\_\_\_\_

**FOR OFFICE USE ONLY**     Approved by Coordinator    TE#: \_\_\_\_\_    BO#: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Operation: \_\_\_\_\_ Food will be served from: \_\_\_\_\_  am  pm To: \_\_\_\_\_  am  pm

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

Location(s) of food preparation: \_\_\_\_\_ Date(s) of prep: \_\_\_\_\_

**FOR OFFICE USE ONLY**     Approved by Coordinator    TE#: \_\_\_\_\_    BO#: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Operation: \_\_\_\_\_ Food will be served from: \_\_\_\_\_  am  pm To: \_\_\_\_\_  am  pm

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

Location(s) of food preparation: \_\_\_\_\_ Date(s) of prep: \_\_\_\_\_

**FOR OFFICE USE ONLY**     Approved by Coordinator    TE#: \_\_\_\_\_    BO#: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Operation: \_\_\_\_\_ Food will be served from: \_\_\_\_\_  am  pm To: \_\_\_\_\_  am  pm

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

Location(s) of food preparation: \_\_\_\_\_ Date(s) of prep: \_\_\_\_\_

**FOR OFFICE USE ONLY**     Approved by Coordinator    TE#: \_\_\_\_\_    BO#: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Event Coordinator: \_\_\_\_\_ Phone: \_\_\_\_\_

Dates of Operation: \_\_\_\_\_ Food will be served from: \_\_\_\_\_  am  pm To: \_\_\_\_\_  am  pm

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

Location(s) of food preparation: \_\_\_\_\_ Date(s) of prep: \_\_\_\_\_

**FOR OFFICE USE ONLY**     Approved by Coordinator    TE#: \_\_\_\_\_    BO#: \_\_\_\_\_

**Reviewed By:** \_\_\_\_\_ **Date:** \_\_\_\_\_