

*County of Moore*  
*Department of Health*  
705 Pinehurst Avenue • P.O. Box 279  
Carthage, North Carolina 28327



Robert R. Wittmann, M.P.H.  
Director

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## Memorandum

**To:** Temporary Food Establishment Managers and Event Organizers  
**From:** Moore County Environmental Health  
**Re:** Temporary Food Stand Permit Requirements

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Attached, please find the guidelines that must be followed in order to obtain a temporary food stand permit.

North Carolina "Rules Governing the Sanitation of Restaurants and Other Foodhandling Establishments" 15A NCAC 18A .2600 generally do not apply to vendors that serve only popcorn, cotton candy, peanuts, candy, bakery items (i.e. cakes, muffins, cookies, pretzels, etc) commercially prepackaged foods or serve beverages in single service containers. However, we need for you to fill out an application for verification.

Food vendors preparing potentially hazardous foods and are non-exempt, the food regulations do apply and a permit must be obtained. **A \$75 permit fee must be submitted with your application a minimum of 15 days prior to the event. No fees/applications will be accepted at the event or after the "15 day prior" cut off.**

If there are any questions, or if clarification is needed, please feel free to call me at (910) 947-6283 between the hours of 8:00am –9:00am and 4:00pm –5:00pm.



**Note: Prepared menu may be attached, however, "food source" section must be completed.**

8. DESCRIBE METHODS FOR HOLDING **HOT** AND **COLD** FOOD:

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9. SITE OF FOOD PREPARATION (check one)

Do you have a Covered Stand? Yes \_\_\_ No \_\_\_

Do you have an Enclosed Trailer or Mobile Food Unit? Yes \_\_\_ No \_\_\_ Are you a permitted mobile food unit or pushcart? Yes \_\_\_ No \_\_\_

If yes, what county are you permitted in? \_\_\_\_\_

10. SEE ATTACHED MEMO FOR REQUIREMENTS ON POTABLE WATER AND WASTEWATER DISPOSAL.

11. Health Department Permit will not be issued until Temporary Food Stand is set up and inspected. DO NOT SELL FOOD WITHOUT A PERMIT.

I have read and completed this application for the above-referenced Temporary Food Establishment (TFE).

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*(Applicant Signature)*

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*(Date)*

**FOR OFFICE USE ONLY**

THIS VENDOR WILL NOT REQUIRE A PERMIT

THIS VENDOR WILL REQUIRE A PERMIT

## GUIDELINES AND CHECKLIST

- \_\_\_\_\_ Overhead protection or enclosed trailer is required (see Fire Marshall Requirements)
- \_\_\_\_\_ A ground covering (carpet, mats, tarp,..) that is non-absorbent in the absence of asphalt, concrete, grass,.. to control dust and/or mud.
- \_\_\_\_\_ Protection against flies and insects (screens or effective use of fans)
- \_\_\_\_\_ Convenient and approved toilet facilities (portable toilets are acceptable)
- \_\_\_\_\_ Running water under pressure w/back flow prevention device(s).
- \_\_\_\_\_ Wastewater disposed of by methods pre-approved by the Health Dept. (Do not dispose of on the ground)
- \_\_\_\_\_ A 3 compartment sink or 3 basins with air drying space for washing utensils. Wash water must be 110F.
- \_\_\_\_\_ Sanitizer solution in a bucket or spray bottle for sanitizing utensils and prep surfaces (1tbsp bleach/gallon of water makes a 50ppm sanitizing solution)
- \_\_\_\_\_ Sanitizer test strips (these can be obtained through a restaurant supply store, a chemical supply company, or a local restaurant)
- \_\_\_\_\_ 2+gallon beverage dispensing cooler with unassisted/free flowing spout for hand washing
- \_\_\_\_\_ 5+ gallon buckets to catch wastewater generated from hand washing station
- \_\_\_\_\_ Soap and paper towels
- \_\_\_\_\_ Garbage can with lid
- \_\_\_\_\_ Method for heating water (pot and propane cooker or hot plate,..)
- \_\_\_\_\_ Refrigeration or insulated cooler with drainage port to maintain foods at 45F or below
- \_\_\_\_\_ Must get water from a pre-approved source onsite or have purchased sealed bottled water. Potable water supply hose (these can be obtained through stores such as Lowes or a camper supply store)
- \_\_\_\_\_ Metal stem food thermometer registering 0-220 degrees Fahrenheit
- \_\_\_\_\_ A food preparation sink must be provided when washing produce.
- \_\_\_\_\_ Necessary utility provisions required at all times food is prepared, served, or stored in the TFE
- \_\_\_\_\_ An employee health policy required in accordance with Subchapter 2-201.
- \_\_\_\_\_ Food shields or effective barriers shall be installed at food and food contact surfaces to prevent contamination. Maintain food storage off the ground.
- \_\_\_\_\_ Lights shall be shielded or shatterproof and required for night time operations
- \_\_\_\_\_ No bare hand contact with ready to eat foods. Food handlers must also wear hair restraints.
- \_\_\_\_\_ Food prepared at a prior event or in an unapproved facility shall not be served. Food receipts must be available.

# Employee Health Policy Agreement

## Reporting: Symptoms of Illness

I agree to report to the manager when I have:

1. Diarrhea
2. Vomiting
3. Jaundice (yellowing of the skin and/or eyes)
4. Sore throat with fever
5. Infected cuts or wounds, or lesions containing pus on the hand, wrist, an exposed body part (such as boils and infected wounds, however small).

## Reporting: Diagnosed Illnesses

I agree to report to the manager when I have:

1. Norovirus
2. Salmonella Typhi (typhoid fever)
3. Shigella spp. infection
4. E. coli infection (Escherichia coli O157:H7 or other EHEC/STEC infection)
5. Hepatitis A

*Note: The manager must report to the Health Department when an employee has one of these illnesses.*

## Reporting: Exposure of Illness

I agree to report to the manager when I have been exposed to any of the illnesses listed above through:

1. An outbreak of Norovirus, typhoid fever, Shigella spp. infection, E. coli infection, or Hepatitis A.
2. A household member with Norovirus, typhoid fever, Shigella spp. infection, E. coli infection, or hepatitis A.
3. A household member attending or working in a setting with an outbreak of Norovirus, typhoid fever, Shigella spp. infection, E. coli infection, or Hepatitis A.

## Exclusion and Restriction from Work

If you have any of the symptoms or illnesses listed above, you may be excluded\* or restricted\*\* from work.

\*If you are excluded from work you are not allowed to come to work.

\*\*If you are restricted from work you are allowed to come to work, but your duties may be limited.

## Returning to Work

If you are excluded from work for having diarrhea and/or vomiting, you will not be able to return to work until more than 24 hours have passed since your last symptoms of diarrhea and/or vomiting.

If you are excluded from work for exhibiting symptoms of a sore throat with fever or for having jaundice (yellowing of the skin and/or eyes), Norovirus, Salmonella Typhii (typhoid fever), Shigella spp. infection, E. coli infection, and/or Hepatitis A, you will not be able to return to work until Health Department approval is granted.

## Agreement

I understand that I must:

1. Report when I have or have been exposed to any of the symptoms or illnesses listed above; and
2. Comply with work restrictions and/or exclusions that are given to me.

I understand that if I do not comply with this agreement, it may put my job at risk.

Food Employee Name (please print) \_\_\_\_\_

Signature of Employee \_\_\_\_\_ Date \_\_\_\_\_

Manager (Person-in-Charge) Name (please print) \_\_\_\_\_

Signature of Manager (Person-in-Charge) \_\_\_\_\_ Date \_\_\_\_\_

# These are some of the Bacterium and Viruses spread from Food Handlers to Food

## E. Coli

**Overview:** A bacterium that can produce a deadly toxin and causes an estimated 70,000 cases of foodborne illnesses each year in the U.S.

**Sources:** Meat, especially undercooked or raw hamburger, produce and raw milk.

**Incubation period:** 2-10 days

**Symptoms:** Severe diarrhea, cramping, dehydration

**Prevention:** Cook implicated food to 155F, wash hands properly and frequently, correctly wash rinse and sanitize food contact surfaces.

## Shigella

**Overview:** Shigella is a bacterium that causes an estimated 450,000 cases of diarrhea illnesses each year. Poor hygiene causes Shigella to be easily passed from person to person.

**Sources:** Salad, milk, and dairy products, and unclean water.

**Incubation period:** 1-7 days

**Symptoms:** Diarrhea, stomach cramps, fever, chills and dehydration

**Prevention:** Wash hands properly and frequently, especially after using the restroom, wash vegetables thoroughly.

## Salmonella

**Overview:** Salmonella is a bacterium responsible for millions of cases of foodborne illnesses a year. Elderly, infants and individuals with impaired immune systems are at risk to severe illness and death can occur if the person is not treated promptly with antibiotics.

**Sources:** raw and undercooked eggs, undercooked poultry and meat, dairy products, seafood, fruits and vegetables

**Incubation period:** 5-72 hours (up to 16 days has been documented for low doses)

**Symptoms:** Nausea, vomiting, cramps, and fever

**Prevention:** Cook all food to proper temperatures, chill food rapidly, and eliminate sources of cross contamination (i.e. proper meat storage, proper wash, rinse, and sanitize procedure)

## Hepatitis A

**Overview:** Hepatitis A is a liver disease caused by the Hepatitis A virus. Hepatitis A can affect anyone. In the United States, Hepatitis A can occur in situations ranging from isolated cases of disease to widespread epidemics.

**Incubation period:** 15-50 days

**Symptoms:** Jaundice, nausea, diarrhea, fever, fatigue, loss of appetite, cramps

**Prevention:** Wash hands properly and frequently, especially after using the restroom.

## Norovirus

**Overview:** This virus is the leading cause of diarrhea in the United States. Any food can be contaminated with norovirus if handled by someone who is infected with the virus. This virus is highly infectious.

**Incubation period:** 6-48 hours

**Symptoms:** Nausea, vomiting, diarrhea, and cramps

**Prevention:** Wash hands properly and frequently, especially after using the restroom; obtain food from a reputable food source; and wash vegetables thoroughly.

## Staph (Staphylococcus aureus)

**Overview:** Staph food poisoning is a gastrointestinal illness. It is caused by eating foods contaminated with toxins produced by *Staphylococcus aureus*. Staph can be found on the skin, in the mouth, throat, and nose of many employees. The hands of employees can be contaminated by touching their nose, infected cuts or other body parts. Staph produces toxins that are extremely heat stable and are not inactivated by normal reheating temperatures. It is important that food contamination be minimized.

**Incubation period:** Staph toxins are fast acting, sometimes causing illness in as little as 30 minutes after eating contaminated foods, but symptoms usually develop within one to six hours.

**Sources:** Ready-to-eat foods touched by bare hands. Foods at highest risk of producing toxins are those that are made by hand and require no cooking.

**Symptoms:** Patients typically experience several of the following: nausea, vomiting, stomach cramps, and diarrhea. The illness lasts one day to three days. In a small minority of patients the illness may be more severe.

**Prevention:** No bare hand contact with ready-to-eat foods. Wash hands properly. Do not prepare food if you have a nose or eye infection. Do not prepare or serve food for others if you have wounds or skin infections on your hands or wrists. If food is to be stored longer than two hours, keep hot foods hot (over 135°F) and cold foods cold (41°F or under). Properly cool all foods.

## Ways of Prevention



1. Handwashing is the MOST CRITICAL control step in prevention of disease. Invest 20 seconds to follow these 6 simple steps:

1. Wet your hands and arms with warm running water.
2. Apply soap and bring to a good lather.
3. Scrub hands and arms vigorously for 10 to 15 seconds (clean under nails and between fingers).
4. Rinse hands and arms thoroughly under running water.
5. Dry hands and arms with a single-use paper towel or warm-air hand dryer.
6. Use the towel to turn off faucets and open door handles so you don't re-contaminate your hands

2. Don't go to work when you are sick

3. No bare hand contact with ready-to-eat foods.

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## Permit Exemption Application for Temporary Foodservice

Name : \_\_\_\_\_  
 (Name of Non-Profit (501c-3))

Location: \_\_\_\_\_  
 (if multiply locations, please complete separate applications)

Non-Profit contact person: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Menu Items	Date/Time of Operation	Date/Time of Operation

**Application should be submitted to the Environmental Health office 15 days prior to the event.**

❖ Include with this application:

Letter from the IRS verification of non-profit status (501c-3)

On non-profit letterhead include:

Name, address and contact person

The purpose of this fundraiser

A statement that all of the proceeds are to be returned to the non-profit.

Dates, times and locations of fundraiser

Date and location of last exempted function

North Carolina General Statute 130A-250 provides an exemption that allows non-profit organizations 501©(3) to conduct a fundraiser once a month for a period not to exceed two consecutive days. Only a single exemption is allowed per month for the entire state of North Carolina, and the exemption cannot be transferred to another organization. This exemption must be renewed for each event.

By signing below, I certify that the information provided on this application is accurate and complete to the best of my knowledge.

Signature & Title: \_\_\_\_\_ Date: \_\_\_\_\_

*“To Protect and Promote Health through Prevention and Control of Disease and Injury.”*  
<http://www.moorecountync.gov/health/>