

## Special Events - Organizer Application Form

This form is for special event organizers only. All food vendors must fill out the *Special Event - Food Vendor Application Form*. This application must be submitted a minimum of **60 days prior to the event**. Completion of this form in detail is essential to the efficient processing of your application. **Only complete sections that apply to your event.**



**Send completed form to:** Thunder Bay District Health Unit  
 Environmental Health Programs  
 999 Balmoral Street, Thunder Bay, ON P7B 6E7  
 Fax: (807) 625-4822 Phone: 625-5930 or 1-888-294-6630, ext. 5930

**SECTION A:**

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

Name of Applicant: \_\_\_\_\_ Contact Name: \_\_\_\_\_

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

Postal Code \_\_\_\_\_ Email Address \_\_\_\_\_

Please check if you are a:     Religious Organization     Fraternal Organization     Service Club

Telephone: (H) \_\_\_\_\_ (B) \_\_\_\_\_ (Fax) \_\_\_\_\_ (Cell) \_\_\_\_\_

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

Municipality: \_\_\_\_\_ Expected Attendance: \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_ Time(s) of Event: \_\_\_\_\_

On-site Contact Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Number of Food Vendors: \_\_\_\_\_ Special Occasion Permit Required:     Yes     No

**SECTION B:**

Provide a list of vendors participating in the event. (Attach additional pages if necessary.)

Food Booth Name	Contact Name	Contact Number

**SECTION C:**

Complete this section if food is to be served at an outdoor event, tournament, festival, concert, jamboree, etc. An on-site maintenance person, responsible for continual maintenance of washrooms and garbage collection, must be designated by the Event Organizer.

On-site Maintenance Person: \_\_\_\_\_ Cell #: \_\_\_\_\_

**Washroom Facilities:**

Number Available: \_\_\_\_\_ Type:  Permanent  Portable\*

\* Identify on-site maintenance person/company: \_\_\_\_\_ Cell #: \_\_\_\_\_

- Handwashing Equipment / Supplies  Moist Hand Towelettes  
 Instant Alcohol-based Hand Sanitizer  
 Central Handwashing Stations

**Water Supply:**  Municipal  Well Water  Bottled  Other \_\_\_\_\_

**Garbage Disposal:**

Type of containers: \_\_\_\_\_ Number of garbage containers: \_\_\_\_\_

Removal Frequency: \_\_\_\_\_ Disposal Location: \_\_\_\_\_

**Animal Exhibit:**

Will there be an animal exhibit of any type at this event (petting zoo, pony rides, etc.)?  Yes  No

Provide a brief description and contact information: \_\_\_\_\_

**SECTION D:**

Please attach a **site plan diagram** to this application. Include locations of food booths, washroom facilities, water spigots, waste disposal sites and water outlets.

I \_\_\_\_\_ certify and accept responsibility for ensuring the above-mentioned information is correct and will be adhered to. I have also read and understood the guidelines provided and will distribute the guidelines to the Food Vendors.

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

**For office use only:**

Comments: \_\_\_\_\_

File #: \_\_\_\_\_

Date Reviewed: \_\_\_\_\_ Approved:  Yes  No Signature of PHI: \_\_\_\_\_

Personal information on this form is collected under the authority of the *Health Protection and Promotion Act, R.S.O. 1990*, as amended and in accordance with the *Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990*. This information will be used to determine approval to operate. Questions regarding the collection of this information should be directed to the Environmental Health Programs, Thunder Bay District Health Unit, 999 Balmoral Street, Thunder Bay, ON P7B 6E7. Telephone (807) 625-5930 or 1-888-294-6630, ext. 5930.