



Pike County Health Department

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Festival Food Vendor Coordinator Information Sheet

Name of Event:

Address of Event:

Date(s) & Time(s) of Event:

Name(s) of Event Coordinator(s)/Planner(s):

Name

Address

Phone Number

Email

1. _____

2. _____

On-Site Coordinator and contact number **during the event:**

Name _____

Cell Phone Number _____

Number of Food Vendor(s): _____

Date(s) & Time(s) foods will be served:

The Event Coordinator Information Sheet must be submitted at least thirty (30) business days prior to the scheduled event.

Any changes to the Event Coordinator Information Sheet shall be submitted not less than fourteen (14) business days prior to the event.

Each food vendor must submit a Temporary/Seasonal Food License Application with the appropriate fee at least fourteen (14) business days prior to the day of the event.

Individual Food Vendor Information: *(please attach additional sheets as needed)*

Name	Address	Phone Number	Email
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

Event Site Description:

1. Describe potable water supply: Public Water Well Water I do not know

If a well water supply is to be used, the results of the most recent water test must be submitted.

2. Describe wastewater disposal system: Public Septic System I do not know

3. Describe method of trash removal:

4. Will **electricity** be provided to each individual site: Yes No

Vendors are required to have refrigeration to maintain potentially hazardous foods at/below 41°F.

Event Coordinator/Planner Signature(s) _____

Submission Date _____

Pike County Health Department • Environmental Health Program

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Office Use Only

Reviewer's Signature and Title

Date

Notes:

