

# PORTAGE COUNTY COMBINED GENERAL HEALTH DISTRICT

705 Oakwood Street  
Suite 208  
Ravenna, Ohio 44266

Phone: 330-296-9919  
Fax: 330-297-3597  
E-mail: [pchd@portageco.com](mailto:pchd@portageco.com)



**Joseph J. Diorio, MPH, MS, RS**  
**Health Commissioner**

Web: [www.co.portage.oh.us/pchd/](http://www.co.portage.oh.us/pchd/)

Temporary Food Operator:

The license fees are:

Noncommercial: \$107.23

(Please submit a copy of your 501(c)(3) paperwork to verify your noncommercial status.)

Commercial: \$214.47

Please remit appropriate fee with all 5 pages of the application **at least two weeks prior to the event.**

If you have any questions, please contact Beth Ahrens at (330) 296-9919 x 103 or at [eahrens@portageco.com](mailto:eahrens@portageco.com).

Thank you.

**Application for a License to Conduct a Temporary:** (check only one)**Instruction:**

1. Complete the applicable section. (Make any corrections if necessary.)
2. Sign and date the application.
3. Make a check or money order payable to: Portage County Health District
4. Return check and signed application to: 705 Oakwood Street, Suite 208  
Ravenna, Ohio 44266

- ☐ Food Service Operation  
☐ Retail Food Establishment

Before the license application can be processed the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in not issuing a license. This action is governed by Chapter 3717 of the Ohio Revised Code.

Name of Temporary food facility:			
Location of event:			
Address of event			
City	State	Zip	Email
Start date: / /	End date: / /	Operation time(s):	
Name of license holder:			Phone number:
Address of License holder			
City	State	Zip	Email
List all foods being served/sold _____ _____ _____ _____			
<i>I herby certify that I am the license holder, or the authorized representative, of the temporary food service operation or temporary retail food establishment indicated above:</i>			
Signature			Date

**Licensors to complete below**

Valid date(s):	License fee:
Application approved for license as required by Chapter 3717 of the Ohio Revised Code.	
By	Date
Audit no.	License no.

As Per AGR 1271 (Rev. 11/00) CHC Software, Inc.  
As Per HEA 5331 (Rev. 11/00) CHC Software, Inc.

The requirements for your temporary food booth depend on your menu. Below is an outline of items that may be required. Please check all boxes that apply; then fill in the corresponding blank spaces.

☐ Approved food sources

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☐ Approved ice sources

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☐ Mechanical refrigeration/freezers (for storing all foods that can spoil)

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☐ Hot hold units

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☐ Probe thermometer (range 0 to 220 degrees F) (Recommended: digital with thin metal tip)

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☐ Safe water supply (municipal, approved well water, or bottled water)

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☐ If water is supplied through a hose, it must be a food grade (drinking water) hose

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☐ Hot water supply (water heater, coffee pot, stove top, etc)

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☐ Hair restraints (hat, visor, bandana, hair net, etc)

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☐ Three compartment sink (or 3 dishpans, buckets)

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☐ Cooking equipment

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☐ Flooring (tarp, plywood, rubber mats, etc)

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☐ Walls (tent, plywood, painted dry wall, etc)

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☐ Ceiling (tent, plywood, painted dry wall, etc)

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☐ Lighting (must be covered or shatterproof bulbs)

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☐ Measures to keep food protected from dirt, dust, insects, customers & vermin

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☐ Waste water disposal (sanitary sewer, dump station, etc)

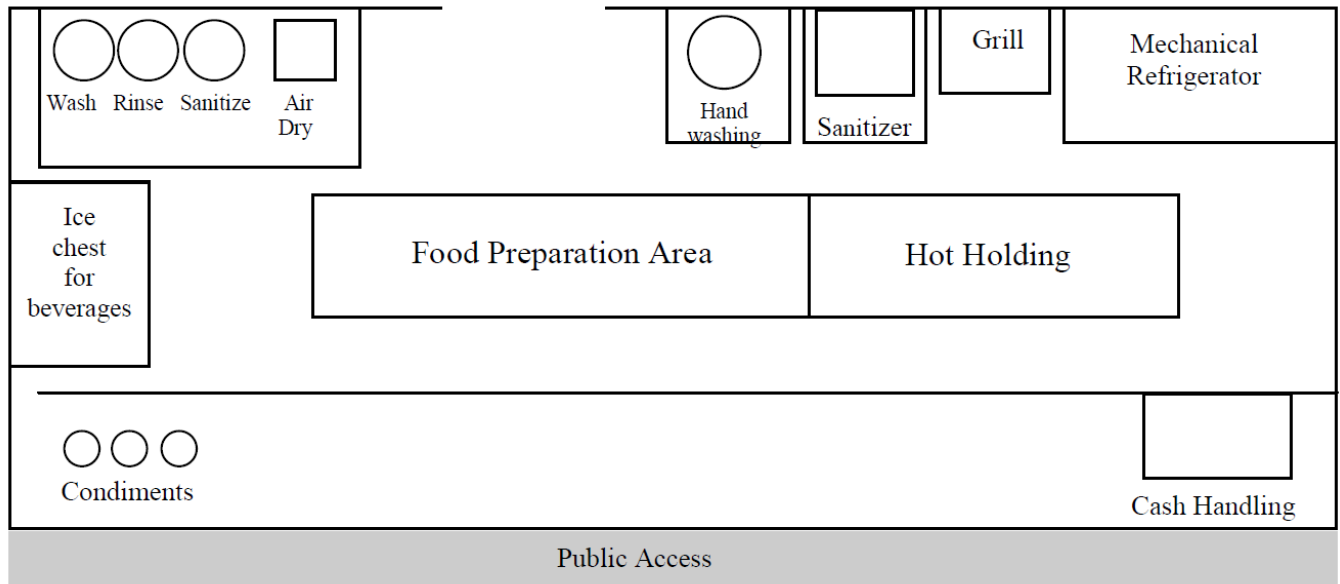
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- ☐ Refrigerator thermometers
- ☐ Disposable gloves
- ☐ Dish soap
- ☐ Garbage container lined with trash bag
- ☐ Sanitizer (one of the following)
  - ☐ Chlorine (plain household bleach)
  - ☐ Quaternary ammonia
- ☐ Test strips (one of the following)
  - ☐ Chlorine
  - ☐ Quaternary ammonia
- ☐ Food prep sink (or dishpan, bucket) for washing produce
- ☐ All food prep personnel in good health
- ☐ Restroom facilities on site of event
- ☐ Food choking poster
- ☐ Equipment & utensils clean, sanitized, and in good repair
- ☐ Live animals excluded from set-up
- ☐ Chemicals and personal items stored away from food
- ☐ Operation free of unnecessary items and litter
- ☐ Hand wash station must be either:
  - ☐ Hand sink with hot and cold running water under pressure OR
  - ☐ Set up according to the diagram below



A drawing of the floor plan and equipment is required.

Example:

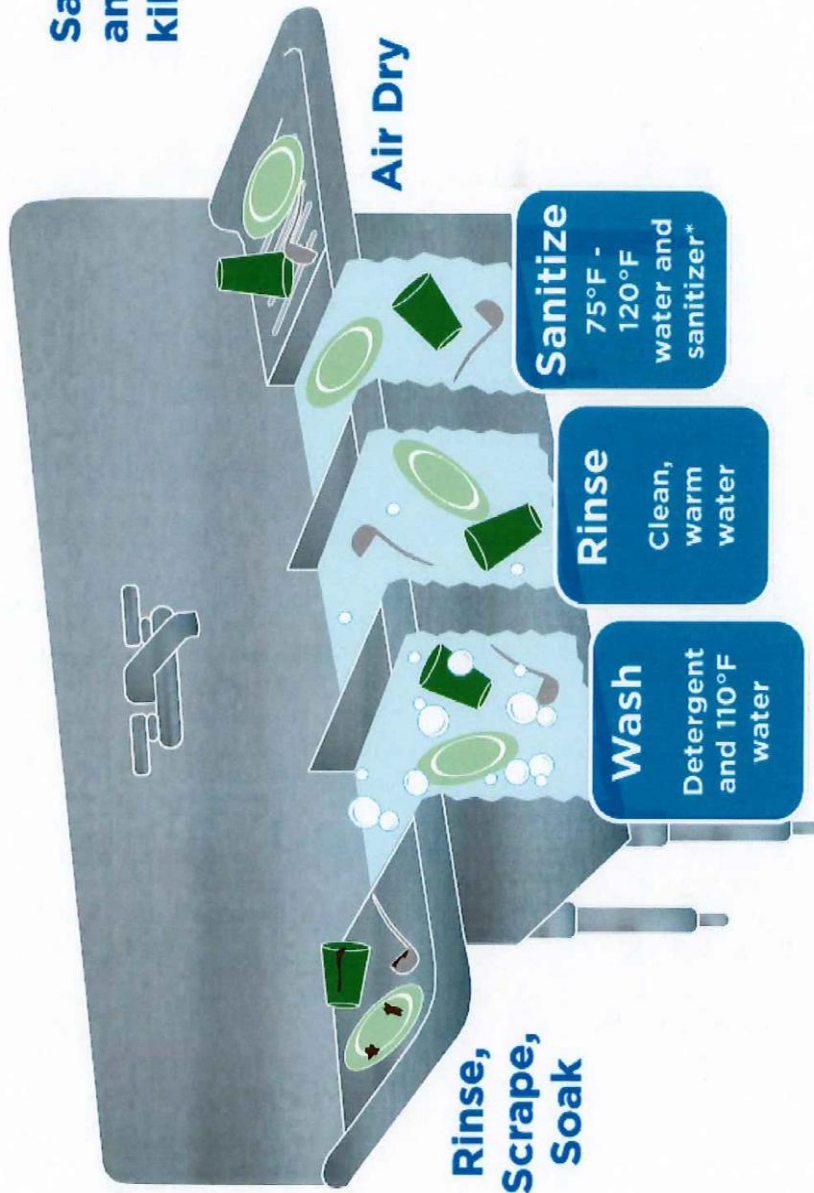


Draw your floor plan and equipment in the space below.

A large, empty rectangular box with a black border, intended for the user to draw their own floor plan and equipment layout.

# 3 Sinks to Wash Utensils

**Wash, rinse, and sanitize when using a 3-compartment sink!**



**Sanitize with the right amount of sanitizer to kill germs!**

50 ppm chlorine for 10 seconds

200 ppm quarternary ammonia for 30 seconds

25 ppm iodine for 30 seconds

*Always follow the label's instructions for proper mixing concentrations*

*\*Use test strips to test the concentration of the sanitizer*



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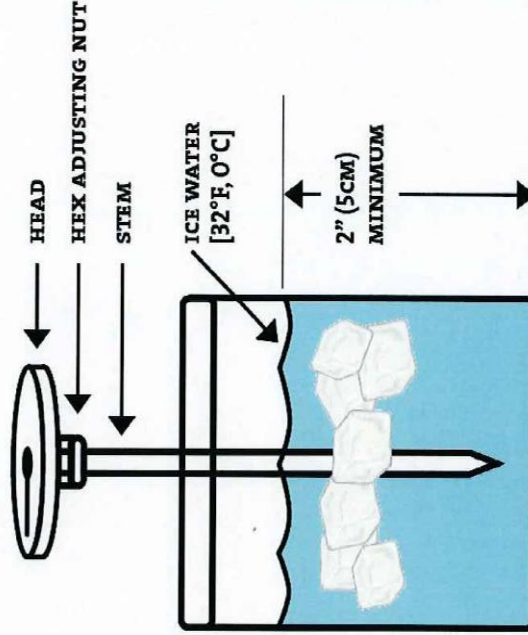
Information obtained from:  
*City of Columbus Health Department*

# Calibrate Thermometer Often

**Make sure temperatures are accurate!**

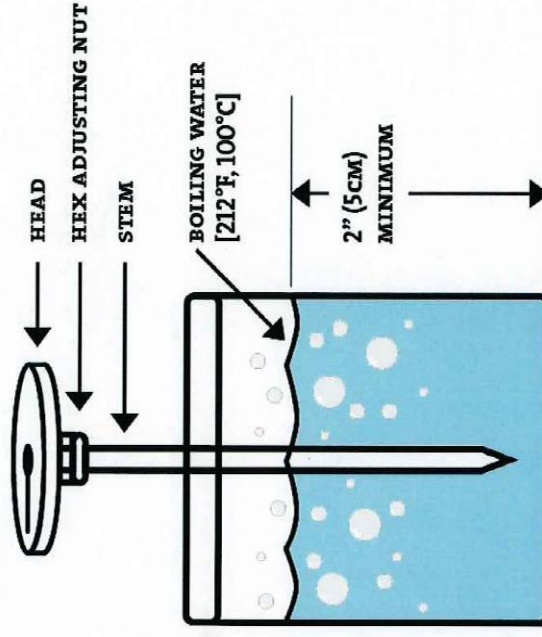
## Calibration in Ice Water

1. Fill a glass with a heaping amount of ice cubes, then top off with cold water.
2. Stir the water and let sit for 3 minutes.
3. Stir again, then insert your thermometer. Do not let the thermometer touch the sides of the container.
4. The temperature should read 32° F.



## Calibration in Boiling Water

1. Bring tap water to a boil in a deep pan.
2. Insert thermometer stem into the boiling water and wait for 30 seconds.
3. Rotate the thermometer stem until it reads 212 °F or boiling temperature.
4. Wait 30 seconds, and recheck temperature.



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# Cooking Temperatures

**Cooking foods to the wrong temperature may cause foodborne illness!**

## Cooking Times and Temperatures

**165°F**

**Temperature: 165°F**

*Time: at least 15 seconds*

**Foods:**

- Poultry (chicken, turkey, duck, fowl)
- Stuffing made with potentially hazardous foods (TCS foods) like meat stocks or broths
- Dishes made from previously cooked foods

**155°F**

**Temperature: 155°F**

*Time: at least 15 seconds*

**Foods:**

- Ground meat, seafood, or ostrich meat
- Injected, marinated, or tenderized meats
- Eggs that will be hot-held for service

**145°F**

**Temperature: 145°F**

*Time: at least 15 seconds*

**Foods:**

- Whole seafood
- Beef, pork, veal, lamb (steaks and chops)
- Roasts (4 minutes)
- Eggs that will be served immediately

**135°F**

**Temperature: 135°F**

*Time: at least 15 seconds*

**Foods:**

- Commercially processed, ready-to-eat food that will be hot-held
- Fruits, vegetables, grains, and legumes that will be hot-held

**Always use a thermometer to check your temperatures!**



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# Cool Foods Safely

Keep germs from growing in your food. Use proper cooling methods!

## IMPORTANT! SAFE WAYS TO COOL FOOD:

**Cool all hot  
foods from  
135°F to 70°F  
in 2 hours  
or less  
then from  
70°F to 41°F  
in 4 hours  
or less!**



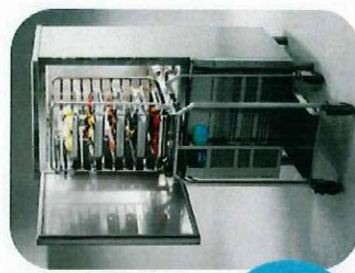
**1 Ice Bath**



**2 Ice Wand**



**3 Shallow Pans**  
(not deeper than 2 inches)



**Blast  
Chiller**



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# Wash Hands Often

It's the best way to stop the spread of disease!

## THE PROPER WAY TO WASH YOUR HANDS



**1** Wet hands.

Use soap.

**2**



**3** Wash hands while counting to 20.

Rinse completely.

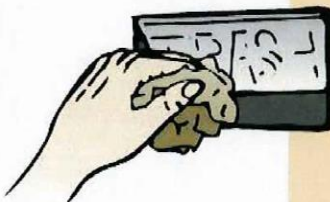
**4**



**5** Dry hands with paper towel.

Use paper towel to turn off faucet.

**6**



**7** Put paper towel in trash.



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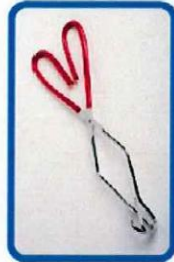
# No Bare Hand Contact

Do not touch foods that are ready to eat with your bare hands!



## USE.....

- . Tongs
- . Gloves
- . Deli or Bakery Tissue
- . Other Utensils



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# Refrigeration Safety

**Separate, don't cross-contaminate. Stack foods in the right order!**

## KEEP FOODS SAFE...

- Refrigerate promptly.
- Never let food sit at room temperature
- Cover and date mark leftover ready-to-eat foods. Discard after 7 days.
- Stack to prevent cross contamination.
- Store food 6 inches off of the floor.
- Hold at 41°F or below.



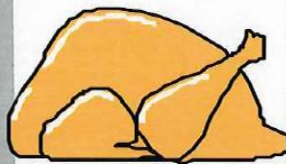
Level 1  
Ready-to-eat-foods  
Pre-cooked foods  
ABOVE



Level 2  
Eggs  
Fish  
Whole Beef  
Whole Pork  
Whole Lamb  
ABOVE



Level 3  
Ground Meats  
ABOVE



Level 4  
Poultry  
BOTTOM



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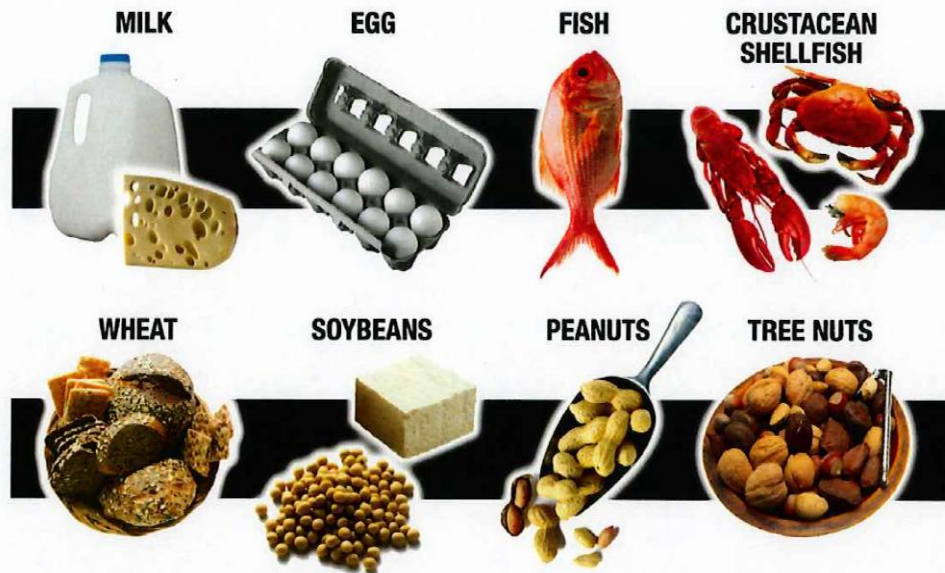
# FOOD ALLERGY AWARENESS!

## WHAT TO KNOW!

A food allergy is an abnormal response to a food triggered by the body's immune system. Once exposed to the allergen, the allergic individual can suffer a mild to life-threatening reaction. The only control is avoidance of the food. Despite taking precautions, allergic people may be unknowingly exposed to an allergen.

Approximately 11 million Americans suffer from true food allergies. Be prepared to protect your customers. Know the eight major food allergens and the symptoms of allergic reaction.

## THE EIGHT MAJOR FOOD ALLERGENS



## SYMPTOMS OF ALLERGIC REACTION

LOSS OF CONSCIOUSNESS • SHORTNESS OF BREATH • ITCHING OR TINGLING IN AND AROUND MOUTH, FACE, SCALP, HANDS AND FEET  
HIVES(WELTS) • WHEEZING AND DIFFICULTY BREATHING • SWELLING OF THE FACE, EYELIDS, TONGUE, LIPS, HANDS OR FEET  
TIGHTENING OF THE THROAT (DIFFICULTY SWALLOWING) • SUDDEN ONSET OF VOMITING, CRAMPS OR DIARRHEA

## WHAT TO DO!

## REACT QUICKLY - CALL 911

**Notify Management - It Could Save A Life!**

**An Allergic Reaction Can Take Only Minutes To Develop. Don't Hesitate!**



Obtained from:  
**FMI**  
THE VOICE OF FOOD RETAIL

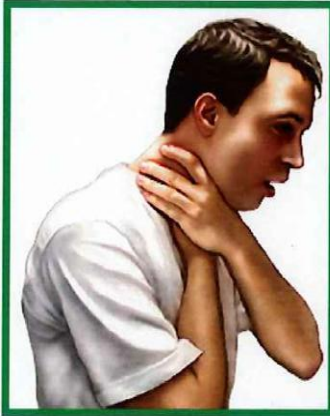


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# First Aid For Food Choking

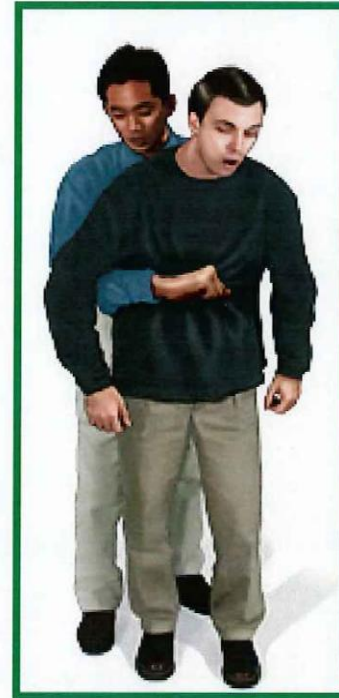


## Emergency Procedures for Adult Victims



- 1. Victim can NOT speak or breathe.**
- 2. Victim turns blue**
- 3. Victim collapses**

**The rescuer must act quickly...  
this condition is life threatening.  
Emergency help should be  
contacted immediately.**



### VICTIM-STANDING OR SITTING

- Stand behind the victim and wrap your arms around victim's waist
- Place fist thumb-side in against victim's abdomen below rib cage, slightly above the belly button
- Grasp your fist with other hand
- Press your fist forcefully with quick upward thrust into victim's abdomen
- Continue the thrusts until the object is expelled or the victim becomes unresponsive. If the victim becomes unresponsive, call 911. Then attempt CPR. Each time you open the airway to provide rescue breaths during the CPR attempt, look in the airway. If you see an object, remove it.

*Information obtained from the Ohio Department of Health*



**Public Health**  
Prevent. Promote. Protect.

## Employee Health Policy Agreement



### Reporting: Symptoms and Exposure of Illness

I agree to report to the manager when I have the following symptoms:

- Vomiting
- Diarrhea
- Jaundice
- Sore throat with fever
- Lesion/infected wound (depending on covering)

or have been exposed to any of the illnesses listed below through:

- An outbreak of reportable illnesses
- A household member having a reportable illnesses
- A household member attending or working in a setting with an outbreak of any of the illnesses

### Reporting: Diagnosed Illnesses

I agree to report to the manager if diagnosed with:

- Campylobacter
- Cryptosporidium
- Cyclospora
- Entamoeba histolytica
- Gardia
- Hepatitis A virus
- Norovirus
- Salmonella spp.
- Salmonella Typhi
- Shigella spp.
- Vibrio cholera
- Yersina
- Enterhemorrhagic or Shiga toxin-producing Escherichia coli

Note: The **manager must actively restrict/exclude** employees with the symptoms. If an employee has been diagnosed by a doctor with one of the above illnesses then the manager **must actively restrict/exclude employees AND report to the Licensors** (Health Department).

### Returning to Work

If you are excluded from work for exhibiting symptoms and/or illnesses listed above, you will not be able to return to work until the symptoms have ended and/or the **Licensors** (Health Department) **approval** is granted.

### Agreement

I understand that I must:

- Report when I have or have been exposed to any of the symptoms or illness listed above; and
- Comply with work restrictions (allowed to come to work, but duties may be limited) and/or exclusions (not allowed to come to work) that are given to me.

I understand that if I do not comply with this agreement, it may put the public at risk and can result in termination.

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Food Employee Name \_\_\_\_\_

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

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

Signature of Manager \_\_\_\_\_ Date \_\_\_\_\_



## Responding to a Vomiting or Diarrheal Incident Food Safety Program

**Background Information:** When the food service operation or retail food establishment experiences a bodily fluid exposure incident, immediate precautions should be taken. The risk of exposure to food equipment, staff, and consumers can be reduced if a proper cleanup plan is followed. Use the following steps as a guideline to help reduce the impact of a bodily fluid exposure incident.

### 1. Designate Staff

Designate staff members who will be responsible for the cleanup of a bodily fluid incident. The staff members should be aware of these procedures, knowledgeable in how to wear Personal Protective Equipment (PPE), and knowledgeable in the proper cleanup procedure for a bodily fluid exposure incident.

### 2. Prepare a Cleanup Kit

The cleanup kit is the first major component when dealing with a bodily fluid exposure incident. The kit should contain at minimum the following items:

- i. Personal Protective Equipment
  1. Disposable Medical Gloves
  2. Shoe Coverings
  3. Eye Protection
  4. Apron/Gown
- ii. Cleaning Supplies
  1. Sealable plastic bags or a biohazard bag
  2. Paper Towels
  3. Scoop
  4. Disinfectant
  5. Absorbent powder (cat litter, sand, or commercial absorbent powder)

### 3. Clean the incident site and the surrounding areas

Use the following approved cleanup procedure to remove the bodily fluid and disinfect the surrounding areas. When followed properly, the cleanup procedures will help reduce the immediate risk of further contamination.

## Cleanup Procedures

1. Put on all necessary personal protective equipment.  
Ensure that all exposed areas of the face and hands are protected from possible contamination.
2. Contain the fluid.  
Use disposable towels, cat litter or sand to cover the fluid.
3. Sanitize the entire contaminated area.  
Use a bleach solution of at least 5000 ppm for surfaces up to 25 feet away from incident. This includes all counters, doors, equipment, and utensils. To prepare the 5000 ppm solution, use 1 2/3 cups unscented bleach to one gallon of water.
4. Remove the bodily fluid.  
Use a scoop and dust pan to ensure that all disposable towels, cat litter or sand is removed from the area. Be careful to prevent further contamination. Dump all waste into a secured biohazard or plastic bag.
5. Clean the area with warm soapy water.  
If a mop head is used, ensure that the mop head is properly cleaned and sanitized prior to reuse. Dump any additional disposable towels, cat litter or sand into the biohazard or plastic bag.
6. Food Protection.  
Discard any exposed food within 25ft of the incident site.
7. Re-glove.
8. Dispose of the first pair of gloves by removing the gloves at the wrist and then pull down to remove the gloves inside out. Wash hands with warm soapy water for at least 25 seconds before putting on a new pair of gloves.
9. Saturate the area with the bleach solution (5000 ppm) for at least 5 minutes. Be sure to properly ventilate the area to prevent the buildup of toxic fumes.
10. Final Cleanup.  
Cleanup the bleach solution by using disposable paper towels. Ensure that all surfaces are clean and any excess bleach solution is removed from the surrounding surfaces.
11. Removal of PPE.  
Remove all PPE in a method to reduce recontamination. Place all PPE items in the plastic bag. Seal the bag. Discard the bag in a safe manner.
12. Thoroughly wash hands.

## Bleach Solution Concentrations:

Bleach Solution (5.25%-Household Unscented Bleach)	Concentration
1:10 (1-2/3 Cups Bleach to 1 gallon of water)	5000 ppm
1:250 (1 Tablespoon Bleach to 1 gall of water)	200 ppm

## Examples of Areas to Disinfect:

Faucets, cooler handles, doorknobs, toilets, hand rails, table/counter surfaces, surrounding floor area, booths, tables, chairs, utensils, and food equipment.

Rev 6/1/2016