



Booth # \_\_\_\_\_  
Ck/Mo/CC \_\_\_\_\_  
Date Received \_\_\_\_\_  
Returning: \_\_\_\_\_

For office use only

**Application/Registration**  
2010 Wistaria Festival  
March 14, 2010

**Application Deadline: Friday, February 19, 2010**

Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Contact Phone Number \_\_\_\_\_

Email \_\_\_\_\_

**Food Vendors:** Please list food items that you will be selling. Be as specific as possible as possible. You can use the back of this application if you need more space. Additionally, you may attach a paper with your menu that includes prices.

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Please include two self-addressed stamped envelopes.

Do you need electricity?

- Yes  
 No

Payment Method to Chamber: CC CK MO

Please see reverse side for payment and fee information

Food Booth Fees

Booth Fee	\$175.00
Administrative Fee (non-refundable)	\$25.00
<u>Public Safety Fee</u>	<u>\$25.00</u>
Total for non-SM Chamber members	\$225.00
Total for Sierra Madre Chamber Members	\$200.00 (Members of the Sierra Madre Chamber of Commerce do not have to pay the \$25.00 Administrative Fee).

Please make check or money order payable to *Sierra Madre Chamber of Commerce*

<u>City Fee</u>	<u>\$30.00</u>
Total	\$30.00

Please make check payable to *City of Sierra Madre*

A separate check or money order made out to *Department of Public Health* must be included with your application submission. Please see Application for Temporary Event Food or Beverage Stand for amount due.

Incomplete applications or failure to include separate checks may result in delay of processing.

If you are paying with a credit card, please fill out the attached Credit Card Payment Form. Please return this application to the address below. Deadline: Friday, February 19, 2010.

2010 Wistaria Festival  
Sierra Madre Chamber of Commerce  
37 Auburn Ave. Suite 1  
Sierra Madre, CA 91024

Application for Special Event Business License  
City of Sierra Madre  
232 W. Sierra Madre Blvd, Sierra Madre, CA 91024

Organization: Sierra Madre Chamber of Commerce

Event:

<b>Wistaria 2010</b>
<b>March 14th, 2010</b>

Business Name: \_\_\_\_\_

Date of Application \_\_\_\_\_

Business Owner: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Business Location: \_\_\_\_\_

Alt. Phone Number: \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Date of Event: March 14th, 2010

Location of Event: Downtown Sierra Madre

Applicant Signature: \_\_\_\_\_

Applicant Name (print) \_\_\_\_\_

Fee: \_\_\_\_\_ \$30.00



License is good for event, location, and date(s) specified only.

Environmental Health  
 1435 West Covina Parkway, Room #10  
 West Covina, CA 91790  
 (626)813-3380  
 Fax(626)813-3333



**Vendor Fee:**

- Food Prep. Booth: \$166.00
- Pre-Package Booth: \$ 58.00
- Food Demo. Booth: \$ 39.50

**Total:** \_\_\_\_\_

County of Los Angeles Department of Public Health  
 Environmental Health

**Plan and Application for Temporary Event Food or Beverage Stands  
 (VENDOR)**

**Booth#** \_\_\_\_\_

Name of Event _____	Date(s) _____
Name of Stand Operator _____	FHP # _____
Address _____ _____	Telephone _____
<input type="checkbox"/> For Profit <input type="checkbox"/> Charitable-Not for Profit <input type="checkbox"/> Not For Profit	

**FOODS**

List all foods to be served. Indicating which foods will be commercially pre-packaged and which will be prepared at the stand. Please list the source of commercially pre-packaged foods or foods that will be prepared in a location other than the stand. Also, list the Public Health Permit / License number of the establishment preparing those foods.

FOOD	COMMERCIALY PRE-PACKAGED	PREPARED AT STAND	PREPARED AT OTHER LOCATION	LOCATION	PHP/L#

If perishable foods are included in the above listing, is refrigeration provided?  Yes  No

If so, what type? \_\_\_\_\_  
 \_\_\_\_\_

## UTENSILS AND EQUIPMENT

**Part A** Multi-use eating and drinking utensils. (e.g. plates, glasses, silverware)?  Yes  No

Multi-use kitchen utensils. (e.g. scoops, spatulas, etc.)?  Yes  No

Utensil Washing sink with hot and cold running water under pressure provided by:

Promoter

Food Stand Operator\*

\*Please complete Part B

**Part B** Location and type of utensil sink \_\_\_\_\_

Method of liquid waste removal:  Connected to public sewerage  Waste tank

Waste tank maintenance schedule \_\_\_\_\_ per day \_\_\_\_\_ per hour

Name of waste removal company \_\_\_\_\_

Address \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

**Part C** List all equipment to be used at event \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Food to be protected from customer contamination by:

Sneeze Guards

Only pre-packaged or Bottled Food or Drink

Hinged Chafing Dishes

Other (Specify): \_\_\_\_\_

Prepared and Handled out of the line of the customer

## FOOD STAND CONSTRUCTION AND EQUIPMENT MATERIALS TO BE USED FOR FLOORS, WALLS, AND CEILING

**Please note: Food stands (outside of building) must be protected from dust contamination on 4 sides and top. A service opening of no more than 216 square inches (12"x18") is allowed.**

Floor \_\_\_\_\_

Walls \_\_\_\_\_

Ceiling \_\_\_\_\_

Comments \_\_\_\_\_

APPLICATION COMPLETED BY \_\_\_\_\_

TITLE \_\_\_\_\_ TELEPHONE ( ) \_\_\_\_\_

# Credit Card Payment Form

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

Name as it Appears in the Credit Card:

\_\_\_\_\_

Credit Card # \_\_\_\_\_

Expiration Date: \_\_\_\_\_

**Amount to be charged:** Booth Fee-\$175.00  
Admin Fee-\$25.00 (non-Chamber members only)  
Public Safety Fee- \$25.00  
Total- \$225.00 (non-Chamber members)  
Total - \$200.00 (Chamber members)

Signature (if applicable): \_\_\_\_\_

For office use only

Date rec'd: \_\_\_\_\_

Credit Card Charge Date: \_\_\_\_\_

Credit Card Charged By:

For: \_\_\_\_\_