



County of Riverside
DEPARTMENT OF ENVIRONMENTAL HEALTH

www.rivcoeh.org

District # _____

PR# _____

PE# _____

SR# _____

EHS _____

District Environmental Services
HOST FACILITY PERMITTING FORM

OCR# _____

Host Business Name:			Date:
Physical Address:	City:	ZIP:	Facility Phone:
Owner Name:			Owner Phone:
Email:			
Website:			

1. Structural Requirements (Check one):

- My facility meets all structural requirements for a Host Facility and has been approved by a Plan Check (PC) Specialist from Riverside County Department Environmental Health (DEH).
- No structural changes have been made since previous PC approval.

2. Equipment/Utensils (Check when complete) :

- List all equipment that will be provided by the Host Facility for all contracted Catering Operations (page 3).

3. Cleaning/Sanitizing Requirements:

_____ I understand that all equipment and utensils must be properly washed, rinsed, sanitized, and air dried utilizing the 3-compartment sink or other method approved by Environmental Health.
 (initial)

_____ Sanitizing will be accomplished using (Check only those that apply):

- (initial)
- 100ppm chlorine for 30 seconds
 - 200ppm quaternary ammonium for 1 minute
 - 25ppm iodine for 1 minute
 - Other: _____

_____ Sanitizer test strips for all appropriate sanitizers will be provided at the Host Facility and will be used regularly to ensure the sanitizer concentration at the 3-compartment sink and in the sanitizer bucket (if applicable) is maintained.
 (initial)

_____ If wiping cloths are used to wipe down surfaces, after use they will be either (1) stored away separately for laundering by the Catering Operations or (2) stored in an approved sanitizer solution between uses during the Catered Event.
 (initial)

4. Hot and Cold Holding of Potentially Hazardous Food (Check only those that apply):

- The Host Facility will not provide any hot or cold holding equipment.
- The Host Facility will provide approved commercial cold holding equipment (with approved, properly calibrated thermometers) capable of holding food at or below 41°F. Information is provided on page 3.
- The Host Facility will provide approved commercial hot holding equipment (with approved, properly calibrated thermometers) capable of holding food at or above 135°F. Information is provided on page 3.
- All hot and/or cold holding equipment will be provided with a reference thermometer.

5. Food Storage:

_____ All food will be maintained at the Catering Operation's permitted food facility before and after the
(initial) Catering Operation.

6. Food Handler Certificates:

_____ All Host Facility staff responsible for handling equipment/utensils, wiping cloths, etc. will
(initial) maintain a valid Riverside County Environmental Health Food Handler Certificate on-site, and certificates will be available for review by a Riverside County Environmental Health Specialist.

7. Catering Operations:

_____ The name, menu, health permit, and distance for all potential Catering Operations that may operate
(initial) from this Host Facility have been attached.

_____ I will update the Proposed Catering Operations document and obtain approval from DEH prior to
(initial) utilizing a Catering Operation not previously listed.

8. Catering Operation Limitations:

_____ I understand that the Catering Operation is only allowed to operate at my Host Facility for four (4)
(initial) hours in any 12-hour timeframe.

9. Trash/Refuse Disposal (Check one):

- Trash and refuse will be removed from the Host Facility by a contracted trash removal company at least twice a week, or more when necessary.
- Other:

I understand and agree that if I make changes to my operating procedures, I must notify the local Environmental Health office within seven (7) days. Revised operating procedures will be reviewed for approval. Failure to comply may result in administrative citation, suspension, or revocation for the Health Permit issued to you.

Owner's Signature

Print Name

Date

Provide a list of all equipment that this Host Facility will be responsible for providing.
 Attach additional sheets if necessary.

Equipment Type	Make / Model for equipment such as refrigerators

Provide a list of all Catering Operations that may be contracted to serve food at this Host Facility.
 Attach additional sheets if necessary.

CATERING OPERATIONS			
Name	Address	Permit Number	Distance from Host Facility
Menu:			
Name	Address	Permit Number	Distance from Host Facility
Menu:			
Name	Address	Permit Number	Distance from Host Facility
Menu:			

FOR OFFICE USE ONLY
Approved By: _____ Date: _____