

# Habersham County Environmental Health Department

130 Jacob's Way STE 102 Clarkesville, GA 30523

Phone: 706-839-0277 Email: [habersham@hph.ga.gov](mailto:habersham@hph.ga.gov)

Applications are taken in office: Monday – Friday between 8:00 AM - 4:00 PM (Closed daily 12:00PM- 1:00PM)

The following items must be received to complete and process your application:

☐ **Permit fees:**

| FOOD SERVICE FEES                                 |          |
|---------------------------------------------------|----------|
| Plan Review                                       |          |
| Temporary Food Service Organizer Fee (for-profit) | \$50.00  |
| Temporary Food Service Vendor Fee (for-profit)    | \$50.00  |
| Temporary Food Service Vendor Fee (non-profit)    | \$50.00  |
| HACCP Plan/Variance Review                        | \$100.00 |

☐ **You will need to submit documentation showing proof of residency using one of the following:**

- U.S. Driver's License.

Or:

- Any documentation that meets the qualifications under Secure and Verifiable Documents Under O.C.G.A. § 50-36-2.

☐ **The applicant shall provide the building owner's information to the Habersham County Environmental Health Department prior to submission of application.** Complete the Building Owners Information Document provided with the application packet.

☐ **A plan review fee will be allotted for the following: new facilities, mobile food units, change of ownership, major/minor renovations, and special processes (e.g., HACCP plans, Type 3 Facility).** Call 706-839-0277 with questions or concerns.

☐ **Plumbing, electrical, fire, and all other applicable utilities are subject to county or local municipality ordinances.** Please coordinate any necessary building inspections with the appropriate county/city official. It is the responsibility of the applicant to verify compliance with all regulations of other state, county and city departments. (e.g. Business License, Planning and Zoning, and Building Inspection).



District 2 Public Health

## Nonprofit Sponsored Temporary Food Vendor Information Record

Health department inspections of nonprofit/municipality/county sponsored temporary food events operating 120 hours or less are conducted at the request of the municipality/county government of jurisdiction. Please complete this record to the best of your ability to assist with proper assessment.

Inspection fee: \$50 per food vendor

Date \_\_\_\_\_ DHD Invoice # (office use only) \_\_\_\_\_

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

Event Organizer: \_\_\_\_\_ Organizer Phone #: \_\_\_\_\_

Date(s) of Operation: \_\_\_\_\_ Daily Hours of Operation: \_\_\_\_\_

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

Person in charge of booth: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail of person in charge: \_\_\_\_\_

Representative / Agent: \_\_\_\_\_ Phone #: \_\_\_\_\_

Representative / Agent Address: \_\_\_\_\_  
Include suite # \_\_\_\_\_ Street # and Name \_\_\_\_\_ Suite \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

E-mail of Representative / Agent: \_\_\_\_\_

The undersigned hereby agrees to comply with the requirements to operate a Nonprofit Temporary Food Service pursuant to the O.C.G.A. 26-2-391.

\_\_\_\_\_  
Vendor Signature

\_\_\_\_\_  
Date

Return the completed document to the Environmental Health Department:

**Habersham County:**

130 Jacob's Way, STE 102, Clarkesville, GA 30523

Office: (706) 839-0277 | Email: habersham@dph.ga.gov

| Item # | ** List All Foods / Beverages and Ingredients | Where Purchased | Onsite Prep Yes / No If NO, where? | Thawing | Holding Temps (Cold / Hot) | Cooking Temps | Reheating Temps |
|--------|-----------------------------------------------|-----------------|------------------------------------|---------|----------------------------|---------------|-----------------|
|        |                                               |                 |                                    |         |                            |               |                 |
|        |                                               |                 |                                    |         |                            |               |                 |
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|        |                                               |                 |                                    |         |                            |               |                 |
|        |                                               |                 |                                    |         |                            |               |                 |

**\*\* Due to the increased risk of food borne illness, the preparation of the following is prohibited unless an established hazard control program has been implemented per O.C.G.A. 26-2-391: (1) pastries filled with cream or synthetic cream; (2) custards; (3) salads containing meat, poultry, eggs, or fish; (4) Products similar to products stated in #1 and #2. \*\*Attach Hazard Control Program documentation for review if planning to serve one or more of these items.**

- How will foodhandler's hands be washed? (i.e.) a hand sink or large container with a spigot for holding water with a catch bucket below)
 

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- How will food be protected from contamination by hands?
 

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- What type container will be used for solid waste disposal in the food facility?
 

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- How will liquid waste / grease be disposed of?
 

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- How will food be protected from flies and other environmental contamination? (e.g. use of screened tent)
 

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