# Temporary Food Booth Application YOKOTA AB

IAW AFMAN 48-147, *Tri-Service Food Code* and DAFI 48-116, *Food Protection Program*

**Public Health Flight Contact Information**

**Phone:** _____

**Email:** _____

**TODAY'S DATE:** _____

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| All Temporary Food Booth Applications must be turned in at least ___ days prior to the event.<br>Please email applications to _____.<br>Allow ___ days for Public Health to process the application. | |
| **1. Organization requesting food booth:**<br>**Food Vendor/Business Name:**<br>**食べ物の屋台を依頼する団体:**<br>**食べ物の販売者／お店の名前:** | |
| **2. Date and time of event:**<br>**イベントの日時:** | |
| **3. Location of event:**<br>**イベントの場所:** | |
| **4. Point-of-Contact (Name, Phone & Email): Vendor/Business Contact Information:**<br>**連絡先（名前、電話、メール）：ベンダー／ビジネスの連絡情報：** | |
| **5. Population intended to serve (Base, squadron, school, etc.):**<br>**Estimated number of attendees:**<br>**対象となる人口（基地、飛行隊、学校など）：**<br>**参加予定人数：** | |
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| **6. Storage and Transportation Information:**<br>**(Where will food be stored between procurement and preparation and how will it be transported? (if applicable))**<br>**保管と輸送についての情報：**<br>**（食材は仕入れと調理の間どこに保管され、どのように運ばれますか？（該当する場合））** | |
| **7. Where will food preparation take place?**<br>**(Home preparation is only permitted for baked goods. All other food products must be made onsite the day of event or at an approved commercial kitchen)**<br>**食べ物の準備はどこで行いますか？（家庭での準備は焼き菓子のみ許可されています。それ以外の食べ物は、イベント当日に現地で作るか、認可された商業用キッチンで作る必要があります）** | |
| **8. Describe what will be done with leftover time-temperature control foods:**<br>**(Plan for multi-day event if applicable)**<br>**残った時間・温度管理食品をどうするか説明してください：**<br>**（該当する場合は複数日イベントの計画も含めて）** | |
| **9. Describe where food handlers wash their hands:**<br>**(Handwashing station required, unless alternative option approved by Public Health)**<br>**食品を扱う人が手を洗う場所を説明してください：**<br>**（手洗い場が必要です。ただし、公衆衛生当局が別の方法を承認している場合は除きます）** | |
| **10. Describe how food contact surfaces will be washed and sanitized:**<br>**食品に触れる表面をどうやって洗って消毒するか説明して:** | |

| **1. RETAILER OR DISTRIBUTOR WHERE PRODUCT WAS PURCHASED**<br>**製品を購入した小売店または販売代理店**<br><br>Walmart, Costco etc. | **2. FOOD ITEM (List each item separately)**<br>**食べ物の項目（それぞれの項目を別々に記入してください）**<br><br>Beef Hamburger, Milk, Hot Dog | **3. PRODUCT BRAND, (Address On Label)**<br>**製品ブランド、（ラベルの住所）**<br><br>Beef Brothers<br>Columbia, SC 29207 | **4. METHOD OF COOKING: HOLDING: STORAGE:**<br>**調理方法：保温方法：保存方法：**<br><br>Cooking: Grill<br>Holding: Warmer<br>Storage: Refrigerator | **5. MANUFACTURE ADDRESS**<br>製造住所 |
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**For Public Health Use ONLY:**

**This temporary food booth has been approved/disapproved and food handlers training has been completed on _____ (must be current within a year).**

**If training is not completed prior to the event, this application will be considered disapproved.**
**Please contact Public Health to receive food handler's Training.**

_____ _____

Applicant Signature Public Health Representative Signature/Stamp