

Mailing address for non-local applicants only:

Southern Nevada Health District, Environmental Health, PO Box 3902, Las Vegas, NV 89127

FedEx, UPS only: Southern Nevada Health District, Environmental Health, 280 S Decatur Blvd, Las Vegas, NV 89107 **All local applicants must apply in person at:**

Southern Nevada Health District, 280 S Decatur Blvd, Las Vegas, NV 89107, (702) 759 -1110 Laughlin Public Health Ctr. @ CC Community Resource Ctr., 55 Civic Way, Laughlin, NV 89029, (702) 759 -1643 Mesquite Public Health Ctr., 830 Hafen Lane, Mesquite, NV 89027, (702) 759 -1682

Applications submitted electronically must be received by 1:00 p.m. for online invoicing to take place

EVENT COORDINATOR APPLICATION FOR TASTING EVENTS, CONVENTIONS and TRADE SHOWS

Type or print clearly - Incomplete applications shall be denied

I.	Event Information								
	Name of Event:								
	Location/Address of event:								
	Event to be held:Enclosed buildingOutdoorBoth								
	Date(s) of event:								
	Hours of event (Specify for each date if different):								
	Vendor set-up time:								
	Anticipated number of patrons for the event: Map Provided @ application Yes No (Maximum per day) Must provide at least two business days before the event								
II.	Contact Information								
	Name of Event Coordinator:								
	Name of Event Sponsor:								
	Event Coordinator phone (during business hours)								
	Event Coordinator EMAIL Address:								
	Event Coordinator mailing address:								
	Contact Name and phone number during event:								
III.	Support Services Information								
	Toilet facilities: Number of Plumbed Number of Portable								
	Handwash facilities: Number of Plumbed Number of Portable								
	Responsible party for maintaining toilet/handwash facilities during event:								
	Will potable water be available? Yes No If yes, where?								
	How will wastewater be disposed of?								
	Describe how electricity will be provided:								
	How will garbage be disposed of?								
	Person(s) responsible for cleaning up: Other services if provided (i.e.: cold storage, commissary, ice truck, dish wash area):								

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Vendor Information

List **ALL** vendors with point of sale at booth <u>including</u> Annual Itinerant Operators and Mobile Vendors. **Each point of sale vendor is required to submit a Temporary Food Establishment Application for Special Event, except currently permitted Annual Itinerants and Mobile Vendors.** *TFE=Temporary Food Establishment; AI = Annual Itinerant; or MV=Mobile Vendor

Vendors. * + =	emporary Food E	-stablishm	nent; AI = Annı	ual Itinerant; or	· MV=Mobile Vendor
Food and beverages b	ooths where money	is exchange	ed. Booths where	food is sampled	and product is sold.
Business Name	PR# (Al and MV)	Type of Permit (*TFE, AI or MV)	Phone Number	Food/Beve	erage served or sold
		<u> </u>			
				(Attach additional p	age if necessary)
List ALL vendors open food/drink w	vithout compens	sation:		•	No money exchange at booth.
company portioning new product out, NO events. The event fees. THE EVENT COOL	food to attract peo D sales at booth). coordinator is re RDINATOR IS RI	ople to their Seen at tra sponsible ESPONSIB	booth or drink ade shows/tastin for an accura	company disper ng/sampling eve te tasting boot TIFYING AND	food is given away (e.g., nsing samples to get their ents but can be at special h count and associated PAYING FOR BOOTHS ED SHALL APPLY.
Dusiness name		Phone Number		everage served	
(Sootii ii ii appiloasio)		1101111001			·
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			(Attach a	additional page if i	necessary)
Total # bever	rage tasting boo	oths:	Total #	food tasting l	booths:

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Fee Assessment – The Event Coordinator is responsible for payment of fees at the time of application and late fees as applicable. <u>ALL PERMIT FEES ARE NONREFUNDABLE – NO EXCEPTIONS.</u> Please make Cashier's checks or money orders payable to: SOUTHERN NEVADA HEALTH DISTRICT. No personal or business checks accepted.

Payment may also be made online with a credit card after you receive an Invoice Number at: http://snhd.info/eh/payment

	Permit Fee	Late Permit Fee (Less than SEVEN DAYS NOTICE)	Late Permit Fee (Less than ONE BUSINESS DAY NOTICE)
Tasting Event Coordinator, Beverage only	\$290.00	\$145.00	\$290.00
1 – 10 booths	Included		
11-20 booths	additional \$120.00		
Each additional 10 booths	additional \$120.00		
Tasting Event Coordinator, Food or Mixed	\$290.00 base fee	\$ 145.00	\$290.00
Food/Beverage			
1-5 booths	additional \$120.00		
Each additional 5 booths	additional \$120.00		

٧.	Event Coordinator Responsibilities		
 2. 3. 4. 	e event coordinator is responsible for the following: Meeting the requirements as set forth in the applicable sections of the Southern I Health District Regulations Governing the Sanitation of Food Establishments. Ensuring that food vendors apply for a Temporary Food Establishment Permit as and shall not allow vendors without required permits to set up at the event. Providing a map indicating the location of support services and food/beverage ve at least two business days prior to the start of the event. Contacting the Southern Nevada Health District prior to the event to provide updates if any changes or additions to this application are made. Obtaining and submitting a SIGNED permission letter or contract from the proper owner, if the event occurs on private property.	Initial required Initial nues Initial	
Ар	plicant name and job title:		_
Ар	plicant email address:		_
Αp	policant phone number Date		

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