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East Las Vegas Public Health Center, 420 N. Nellis Blvd, Suite A-5, Las Vegas, NV, 89110 – (702) 759-0620
Henderson Public Health Center, 520 E. Lake Mead Drive, Henderson, NV 89015 – (702) 759-0501
Laughlin Environmental Health Office, 3080 Needles Hwy, Suite 1800, Laughlin, NV 89029 – (702) 759-1643
North Las Vegas Public Health Center, 400 Shadow Lane #104, Las Vegas, NV 89106 – (702) 759-0502
Spring Valley Environmental Health Office, 6330 W. Spring Mountain, Suite A, Las Vegas, NV 89146 – (702) 759-0503

EVENT COORDINATOR APPLICATION FOR
SPECIAL EVENTS and TRADE SHOWS

Type or print clearly - Incomplete applications shall be denied

A fee of \$278.00 must be paid at the time of application. This application MUST be received at the office at least seven (7) calendar days PRIOR to the event or a late fee of \$88 (1-5 day event); \$105 (6-10 day event); or \$132 (11-14 day event) will be assessed. The late fee will be double if the application is received less than 24 hours from the start of the event. NO EXCEPTIONS.

Please make Business checks payable to: SOUTHERN NEVADA HEALTH DISTRICT
NO PERSONAL CHECKS ACCEPTED

I. Event Information

Name of Event:
Location/Address of event:
Event to be held: Enclosed building Outdoor Both
Date(s) of event:
Hours of event (Specify for each date if different):
Vendor set-up time:
Anticipated number of patrons for the event:

II. Contact Information

Name of Event Coordinator:
Name of Event Sponsor:
Event Coord. phone number during business hours:
Event Coord. 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, dishwasher area):

IV. Vendor Information

List ALL vendors with point of sale at booth including Low Risk Annual Itinerant Operators

Food and beverages booths where money is exchanged. Booths where food is sampled and product is sold.

Business Name	Phone Number	Food/Beverage served or sold
		(Attach additional page if necessary)

List ALL vendors serving open food/drink without compensation:

No money exchange at booth.

Booths where open food is given away (e.g. company portioning food to attract people to their booth or drink company dispensing samples to get their new product out, NO sales at booth). Seen at trade shows/tasting events but can be at special events.

Business Name (booth # if applicable)	Phone Number	Food/Beverage served
		(Attach additional page if necessary)

V. Event Coordinator Responsibilities

The event coordinator is responsible for the following:

1. Meeting the requirements as set forth in the applicable sections of *the Southern Nevada Health District Regulations Governing the Sanitation of Food Establishments*.

Initial _____

2. Ensuring that food vendors apply for a Temporary Food Establishment Permit as required and shall not allow vendors without required permits to set up at the event. **Initial** _____

3. Providing a map indicating the location of items listed in Sections III and IV at least two business days prior to the start of the event. **Initial** _____

4. Contacting the Southern Nevada Health District **prior to the event** to provide updates if any changes or additions to this application are made.

Initial _____

Print name and job title: _____

Signature _____ Date _____