



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, 700 Desert Lane, Las Vegas, NV 89106

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 Center, 55 Civic Way, Laughlin, NV 89029, (702) 759-1643 Mesquite Public Health Center, 830 Hafen Lane, Mesquite, NV 89027 – (702) 759-1682

EVENT COORDINATOR APPLICATION FOR CONVENTIONS, SPECIAL EVENTS 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 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: _____ 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) and

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): _____

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

	Permit Fee	Late Permit Fee (Less than SEVEN BUSINESS DAYS NOTICE)	Late Permit Fee (Less than ONE BUSINESS DAY NOTICE)
Event Coordinator (No tasting booths)	\$290	\$145	\$290
Tasting Event Coordinator, Beverage only 1 – 10 booths 11-20 booths Each additional 10 booths	\$290 Included additional \$120 additional \$120	\$145	\$290
Tasting Event Coordinator, Food or Mixed Food/Beverage 1-5 booths Each additional 5 booths	\$290 base fee additional \$120 additional \$120	\$ 145	\$290

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 support services and food/beverage venues **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**_____
5. Obtaining and submitting a permission letter from the property owner, if the event occurs on private property. **Initial**_____

Print name and job title: _____

Signature _____ Date _____

SNHD Use Only

	Applied For	At Event
# TFE		
# MV		
# AI		
# Sampling		