

STONY BROOK UNIVERSITY
 Environmental Health & Safety
 110 Suffolk Hall, Stony Brook, NY 11794-6200
 Phone: 2-6410 Fax: 2-9683 Zip: 6200
 www.stonybrook.edu/ehs

FOOD PERMIT

Instructions: Please read EH&S Policy 1-15, *Food Safety*, before completing this application. The policy is on EH&S' website.

EVENT & CONTACT INFORMATION

Organization's Name:		Filing Date to EH&S:	
Food Coordinator:		Phone No.:	
Campus Address:		FAX:	
Name of Event:		Event Date:	
Location of Event:		Time Food to be Delivered:	
Approximate Number of Attendees:		Event Hours:	

TYPE OF EVENT

Campus Community Event
 An event that is only open to the campus community (students, faculty and staff) and their invited guests only.

Instructions:
 Food Coordinator's must **fully complete** and submit this food permit application to EH&S at least **10 days** prior to the event.

FOOD ESTABLISHMENT/SOURCE

Name:			
Address:			
Contact Name/Phone No:			
Permit Number:		Expiration Date:	
Does the Food Establishment have 'Off-Premises Catering' on their permit? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Distance of Food Establishment from University: <input type="checkbox"/> within 10 miles <input type="checkbox"/> greater than 10 miles			

FOOD SAFETY

List the foods you will be serving at the event. Be specific.

How will food be transported and temperatures (Hot Food >140°F/Cold Food <41°F) maintained during delivery?

Will any food preparation or cooking be performed on campus? Yes No Note: Food must be prepared in a permitted facility only. Additional permits and/or arrangements will be required, if cooking on campus.

Who will be serving the food (caterer, self serve, sponsoring group)?

How will safe food temperatures (Hot Food >140°F/Cold Food <41°F) be maintained during the event? Type of equipment?

Identify equipment that you will provide and utilize to ensure safe handling.

<input type="checkbox"/> Disposable gloves	<input type="checkbox"/> Food thermometer	<input type="checkbox"/> Handwashing location: _____
<input type="checkbox"/> Aprons	<input type="checkbox"/> Serving utensils	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Hair nets or hats	<input type="checkbox"/> Disposable utensils	

Signature of Food Coordinator: _____

EH&S APPROVAL AND AUTHORIZATION

<p><input type="checkbox"/> APPROVED</p> <p>Your application for a food permit has been approved. The Food Coordinator is responsible for ensuring the safe handling of food in accordance with this Food Permit and EH&S Policy 1-15. The temperature of food shall be taken and recorded on the Food Temperature Recording Chart upon its arrival and at 30 minute intervals. All food must be discarded after 2 hours.</p>	<p><input type="checkbox"/> DISAPPROVED</p> <p>FOOD MAY NOT BE SERVED AT THIS EVENT!</p> <p>Your application for a food permit has been disapproved for reasons noted below.</p> <table border="0"> <tr> <td><input type="checkbox"/> Lack of information</td> <td><input type="checkbox"/> Transport</td> </tr> <tr> <td><input type="checkbox"/> Food establishment</td> <td><input type="checkbox"/> Handling</td> </tr> <tr> <td><input type="checkbox"/> Type of food</td> <td><input type="checkbox"/> Other: _____</td> </tr> </table>	<input type="checkbox"/> Lack of information	<input type="checkbox"/> Transport	<input type="checkbox"/> Food establishment	<input type="checkbox"/> Handling	<input type="checkbox"/> Type of food	<input type="checkbox"/> Other: _____
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EH&S Comments:

Reviewed by:	Phone:	Date:
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EH&S Policy 1-15, Food Safety - Revised April, 2010

THIS PERMIT MUST BE POSTED AT THE FOOD EVENT