



**COUNTY OF SAN LUIS OBISPO HEALTH AGENCY
ENVIRONMENTAL HEALTH SERVICES DIVISION**

2156 Sierra Way STE. B, San Luis Obispo, CA 93401
 PO Box 1489, San Luis Obispo, CA 93406
 Phone: (805) 781-5544 Fax: (805)781-4211
 Email: ehs@co.slo.ca.us

WRITTEN OPERATIONAL PROCEDURES FOR CATERING OPERATIONS

These written operational procedures must be **completed and returned to this office for approval before the permit to operate will be issued**. An approved and signed copy must be maintained with the catering operator during all operational periods.

CATERING OPERATION OWNER/OPERATOR INFORMATION

Name of Business:			
Owner's Name:		Operator Name (if different from owner):	
Owner's Address:		City:	State:
Billing Address (if different):		City:	State:
Owner Phone Number:		Operator Phone Number (if different):	
Email(s):			

SHARED PERMANENT KITCHEN FACILITY INFORMATION (required only for dependent catering operations)

Permanent Facility Name:	Contact Person & Title:	PR#
Permanent Facility Address:	City:	ZIP:
Permanent Facility Email:	Phone Number(s):	
Hours/Days of Operation at permanent facility:		
<input type="checkbox"/> Sun: _____ <input type="checkbox"/> Mon: _____ <input type="checkbox"/> Tue: _____ <input type="checkbox"/> Wed: _____ <input type="checkbox"/> Thu: _____ <input type="checkbox"/> Fri: _____ <input type="checkbox"/> Sat: _____		

FOOD PRODUCTS AND PREPARATION

FOOD PRODUCTS

1. Indicate applicable menu items:

<input checked="" type="checkbox"/>	FOOD ITEM	<input checked="" type="checkbox"/>	FOOD ITEM
<input type="checkbox"/>	Beef or pork: <input type="checkbox"/> frozen <input type="checkbox"/> raw <input type="checkbox"/> precooked	<input type="checkbox"/>	Gravies, Sauces, or Soups
<input type="checkbox"/>	Fish: <input type="checkbox"/> frozen <input type="checkbox"/> raw <input type="checkbox"/> precooked	<input type="checkbox"/>	Green salads
<input type="checkbox"/>	Poultry: <input type="checkbox"/> frozen <input type="checkbox"/> raw <input type="checkbox"/> precooked	<input type="checkbox"/>	Sandwiches
<input type="checkbox"/>	Shellfish: <input type="checkbox"/> frozen <input type="checkbox"/> raw <input type="checkbox"/> precooked	<input type="checkbox"/>	Condiments
<input type="checkbox"/>	Vegetables: <input type="checkbox"/> frozen <input type="checkbox"/> raw <input type="checkbox"/> precooked	<input type="checkbox"/>	Beverages
<input type="checkbox"/>	Rice or Beans	<input type="checkbox"/>	Other:
<input type="checkbox"/>	Pasta	<input type="checkbox"/>	

2. Indicate where foods are obtained:

<input type="checkbox"/> Retail store	Store Name(s):
<input type="checkbox"/> Delivery service	Company Name(s):

3. How often are refrigerated or frozen foods obtained/delivered? Daily Weekly Other (describe): _____

4. How often are dry foods or supplies obtained/delivered? Daily Weekly Other (describe): _____

FOOD PREPARATION

5. Owner/operator food safety certification and employee food handler cards are valid and current: Yes No

6. Indicate the types of food preparation activities

<input checked="" type="checkbox"/>	ACTIVITY	<input checked="" type="checkbox"/>	ACTIVITY
<input type="checkbox"/>	Refrigeration of foods	<input type="checkbox"/>	Washing foods (requires food prep sink at commissary)
<input type="checkbox"/>	Cooking foods	<input type="checkbox"/>	Thawing frozen foods (requires food prep sink at commissary)
<input type="checkbox"/>	Holding foods hot for more than 30 minutes	<input type="checkbox"/>	Slicing, grinding, portioning of foods
<input type="checkbox"/>	Cooling foods which have been heated or cooked	<input type="checkbox"/>	Packaging of foods
<input type="checkbox"/>	Reheating foods	<input type="checkbox"/>	Acidification of foods
<input type="checkbox"/>	Preparing foods for next day service	<input type="checkbox"/>	Other:

7. Indicate which food items will be prepared at the permanent food facility and the process of preparation: _____

8. Indicate which food items will be prepared at off-site events and the process of preparation: _____

9. Describe in detail the methods of packaging food items – explain the method of packaging and include a sample food label:
 Cook-chill packaging Reduced Oxygen Packaging Vacuum Packaging Canning/bottling foods
 Sous Vide Prepackaged Juice Other (**describe**): _____

10. Describe what you will do with leftovers: _____

11. Are you storing any items at any place other than the shared permanent food facility? Yes No
12a. If yes, **describe** (storage of food, beverages, utensils, or equipment at a private home is strictly prohibited): _____

SHARED PERMANENT FOOD FACILITY EQUIPMENT, UTENSILS, LINENS, AND SUPPLIES

12. Indicate the equipment/utensils provided at the shared permanent food facility that will be used for operation:
 Handwashing sinks Food prep sink Three-compartment sink Commercial dishwashing machine Mixers
 Cooking equipment Prep tables Hot holding equipment Rapid cooling blast chiller
 Refrigerator (walk-in) Freezer (walk-in) Barbeque (permitted use only at commissary or community events)
 Other (**describe**): _____

13. Describe the **procedures and schedules for cleaning and sanitizing of utensils and equipment** at the permanent food facility:

14. Indicate the type of sanitizer to be used for the sanitization of food contact utensils and equipment? Provide test strips for confirmation): Chlorine (100 ppm/30 sec) Quaternary Ammonium (200 ppm/1 min) Iodine (25 ppm/1 min)

OFF-SITE OPERATION

ACKNOWLEDGEMENT OF INTENDED COMPLIANCE

→ _____ ***Initial next to each item as indicated to acknowledge compliance with each.***

FOOD STORAGE AND PREPARATION
→ _____ 1. All food storage and preparation, prior to off-site food service, will occur at the approved permanent food facility.
→ _____ 2. No food, beverages, equipment, or utensils will be stored in a private home.
→ _____ 3. Direct-to-consumer sales, if occurring, will only be conducted at a permitted Host Facility.

FOOD TRANSPORTATION
4. Describe **how food will be transported between the permanent food facility and the off-site event or host facility**:

→ _____ 5. Vehicle interior floor, sides, and top of the food holding area are smooth, washable, and of impervious material to withstand frequent cleaning.
→ _____ 6. The food holding area must be contained and operated so that no liquid wastes can drain onto any street, sidewalk, or premises.
→ _____ 7. Potentially hazardous foods will be maintained at the required holding temperatures (below 41°F or above 135°F).

WATER SUPPLY AT OFF-SITE FOOD SERVICE EVENT
→ _____ 8. While operating off-site, the catering operator will ensure access to potable water or shall bring an adequate supply of potable water with it to the off-site event.

TOILET FACILITIES AT OFF-SITE FOOD SERVICE EVENT
→ _____ 9. Approved toilet with handwashing facility will be available within 200 feet of the off-site food service operation.

HANDWASHING AT OFF-SITE FOOD SERVICE EVENT

- **10.** Adequate handwashing facilities will be provided at food preparation and service areas at offsite food service events.
10a. Describe **how handwashing will be performed at off-site service locations**, include frequency, supplies for off-site operation, etc.: _____

CLEANING AND SANITIZING OF UTENSILS AND EQUIPMENT DURING OFF-SITE OPERATION

- 11.** Describe the **procedures and schedules for cleaning and sanitizing of utensils and equipment** at off-site events or host facility: _____

- 12.** Will you be bringing extra utensils in lieu of washing and sanitizing at the off-site event or host facility? Yes No

FOOD, UTENSILS, EQUIPMENT, LINENS STORAGE & PROTECTION FROM CONTAMINATION

- **13.** Food, utensils, equipment, and linens will be protected from contamination at all times.
13a. Describe the **procedures for maintaining food temperatures** and **protecting food from contamination** during:
Hot and Cold Storage: _____

Preparation: _____

Transport: _____

Food Service: _____

- 13b.** Describe the **procedures for how utensils, equipment, and linens** used in conjunction with the catering operation will be **stored and protected from contamination**: _____

- **14.** Utensils used to serve food are approved for retail food service.
→ **15.** Utensils will be stored in the food with the handle extended out of the food, on a clean surface, or in a clean container.
→ **16.** Utensils will be replaced every four hours, or sooner if observed to be mishandled by the guest, dropped, or otherwise contaminated during the serving process.

DISPOSAL OF REFUSE AND LIQUID WASTE GENERATED DURING OFF-SITE FOOD SERVICE EVENT

- **17.** All garbage and refuse generated during an off-site event re disposed of in an approved manner
17a. Describe the **methods and schedules for the disposal of refuse**: _____
- **18.** All liquid waste generated during an off-site event will be disposed of through an approved plumbing system in an approved manner.
18a. Describe the **methods and schedules for the disposal of liquid waste**: _____

IDENTIFICATION AND RECORD KEEPING OF OFF-SITE CATERING ACTIVITY

- **19.** While operating off-site, the catering operation will provide the name and operator of the catering operation, city, state, and zip code to any consumer or Environmental Health Services (EHS) upon request.
- **20.** The catering operation will **maintain records** for all off-site food service activities for 90 days after each event and provide those records to EHS upon request.
- **20a. Records will include the following information:**
- Location, date, and time of offsite food service activity.
 - Customer name and contact information, including address, email address, and phone number.
 - Whether food was delivered to a customer or served to a guest at a catered function or Host facility.
 - Departure & arrival transportation temperature logs and corrective action taken if the food arrived out of temperature.
 - Complete menu of food provided.

PERSON IN CHARGE RESPONSIBILITIES

→ ___ **21.** For off-site food service where a catering operation is serving the food, the **person in charge** on behalf of the catering operation will ensure that basic food safety is maintained at all times, including, but not limited to, all of the following:

- ___ Protecting food from contamination during service.
- ___ Providing overhead protection over all food handling areas.
- ___ Providing utensils for individual use and eliminating the use of community dipping containers where consumers could dip a utensil or a food item they have already placed into their mouth.
- ___ Preventing consumers' used plates or utensils from returning to the self-service display.
- ___ Replacing utensils that become contaminated with clean and sanitized utensils.
- ___ Ensuring open or potentially hazardous foods not consumed or sold are discarded unless the food was held at required temperatures and protected from contamination at all times.
- ___ Discarding any food that has become contaminated or is suspected of becoming contaminated, or that is presumed unsafe because required temperatures were not maintained.

OFF-SITE EVENT STRUCTURAL REQUIREMENTS

→ ___ **22.** I understand that Environmental Health Service may establish additional structural or operational requirements, or both, based on the proposed facility method of operation and as necessary to ensure compliance with operational requirements.

STATEMENT OF INTENDED COMPLIANCE; DEPARTMENT APPROVAL

I hereby certify under penalty of perjury that the above information is true and correct, that I have read and understand the "Catering Operation Permitting and Operational Requirements" handout, and will operate my catering operation in compliance with the requirements set forth in the California Health and Safety Code. Any changes to the approved operation must be reported to this Agency in writing prior to changes in the menu, location, equipment, or operations, or the catering operator's health permit may be void.

Catering Operator Name (print and sign): _____

Date: _____

Approved by: _____

Date: _____