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Office Use Only:				
	Approved			
	Denied			
	Plans and Specs Requested			

Amplicant N	•••						
Applicant Name:			Daytime Contact Phor	16:			
			2011				
Event Date	Event Location	n	Mailing Address				
Business name (if applicable) City, State, Zip			City, State, Zip				
EXEMPT FOOD ITEMS (Check all that apply)							
Chocolate-dipped bananas (if made with bananas peeled and frozen in an approved facility)							
Chocolate-dipped ice cream bars (if made with commercially packaged ice cream bars)							
Cotton candy							
Corn on the cob (if roasted for immediate service)							
Dried herbs and spices (if processed in an approved facility)							
Machine-crushed ice drinks ( <i>if made with non-potentially hazardous ingredients and ice from an approved source</i> )							
Popcorn (including kettle corn)							
Roasted nuts and peanuts (including candy-coated)							
Sliced fruits and vegetables for sampling (if used for individual samples of non-potentially hazardous produce)  Whole roasted peppers (if roasted for immediate service)							
	our application, an inspector will review	•	nay ha acked to provide ad	ditional inf	ormation		
	tion is approved, NO changes may be mo			aitionai iiij	ormation.		
Food Safety R	equirements: s are required to make sure that fo						
	Yes No						
Read the statements below and mark Yes (Y), No (N), or Not Applicable (N/A).					N/A		
1. At least one person in the establishment will have a valid Washington State Food Worker Card.							
2. You will enforce an illness and handwashing policy and provide a handwashing facility during food							
preparation.							
3. You will provide water, ice and food from approved sources. Home storage or preparation is not							
allowed.							
4. You will use approved barriers including utensils, paper wraps, and gloves (which must be changed when contaminated, ripped, or after changing tasks) to prevent bare hand contact with all							
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ready-to-eat foods.  5. You will make sure that your employees have accessible restrooms. All							
employees must wash their hands after using the restroom.  6. You will provide an adequate number of clean utensils or a 3 basin dish- wash facility. All utensils							
will be washed in hot, soapy water (basin 1), rinsed in clean water (basin 2), sanitized (basin 3), and							
air dried before use.							
7. You will store all food, ice and single-service products off the ground and away from sources of							
contamination. You will only use food-grade containers for food storage and transport.					. Ц		
8. You will make sure all food-contact surfaces are sanitized prior to, and during, food preparation.							
Signature of Ap	oplicant Date	Signature of Regulato	ry Authority	Date	?		
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Modified by: AF, WS, KS EΗ Version:1 Supersedes: 0 Date Adopted: 5/01/2019 Approval By: Jesse Cox