

EVENT COORDINATOR



Cape Girardeau County Public Health Center
Environmental Services
1121 Linden Street
Cape Girardeau, MO 63703
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Phone 573-335-7846 ext. 128
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Name of Event:

Date(s)

Location:

Set-up time: _____ Event operation hours: _____

Event Coordinator- Name: _____ #1 Phone: _____

Address: _____ #2 Phone: _____

Number of food booths expected: _____ Please send a list of Food Vendors, addresses, and phone numbers to Health Department 2 weeks before the event.

Will electricity be provided for the food booths? Yes No

If yes, what is the source? Public Utility Private/ Generators

Will equipment/utensil washing facilities be provided for food booth operators? Yes No

If yes, please describe:

Describe restroom facilities: _____

Describe restroom hand washing facilities: _____

Describe water supply: _____

Describe waste water disposal: _____

Describe garbage disposal (including frequency of pick-up): _____

Will the booths be located on a non-absorbent surface? Yes No

If no, please describe: _____

Print Your Name

Your Signature

Date

You may e-mail this form to environmental@capecountyhealth.com