



Sponsor Application

Failure to submit the application at least 14 days prior to the event will result in additional fees. Food/beverage vendors will not be permitted at events when applications are submitted 7 days or less from the event. Please see the current fee schedule. Sponsor and all TFF Concessionaire Application fees shall be received in one check.

Attach a list of all food/beverage booths and mobile food facilities (MFF) - indicate locations of each booth and MFF on a site map. For each food booth and MFF, attach a completed Temporary Food Facility (TFF) Application that has been signed by the TFF Applicant.

| | | | |
|---|------------------------------|---|--|
| Event Information | | <input type="checkbox"/> 1 st Time Event | <input type="checkbox"/> Reoccurring Temporary Event |
| Name of Sponsor/Organization: | | | |
| Business Address: | | City, Zip Code: | |
| Event Coordinator: | | Phone #: | |
| Event Date(s) & Time(s): | | Email: | |
| Contact Person On-site: | | Cell Phone #: | |
| Name of Event: | | | |
| Event Address: | | City, Zip Code: | |
| Business Phone#: | | Hour(s) of Operation: | |
| Designated parking available for inspection staff? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Parking Pass? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Parking Location: | | Time booths will be ready to inspect: | |
| Number of food/beverage booths: _____ | | | |
| Number of mobile food facilities (MFF): SF Permitted: _____ Non-SF/MFF Permitted: _____ | | | |

| | | |
|---|---------------------------------|----------------------------------|
| Event Location Details: | <input type="checkbox"/> Indoor | <input type="checkbox"/> Outdoor |
| Is potable water supply available for each food booth? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is electricity supply available for each food booth? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Who will provide approved hand wash stations available at each booth preparing or sampling food/beverage? | | |
| <input type="checkbox"/> Sponsor/Organizer OR <input type="checkbox"/> Vendor(s) | | |
| Method of liquid waste disposal for food/beverage booths: | | |

As the event Sponsor/Organizer, I will act as contact person for the San Francisco Department of Public Health (SFDPH). I am responsible for submitting the Sponsor Application, a Food Concessionaire Application for each vendor, a list of food/beverage vendors and a site plan to SFDPH at least 14 days prior to the date of the event. I am responsible for submitting the appropriate fees to SFDPH at least 8 days prior to the date of the event. I recognize my part in ensuring food safety at the event by organizing the site appropriately, ensuring a potable water source and approved waste system is provided. By acceptance of the permit for the above noted event, the permittee agrees to indemnify, hold harmless, and assume the defense of the City and County of San Francisco from and against any and all claims, demands, and actions for damages resulting from work under this permit, regardless of the negligence of City and County of San Francisco. I have read and understood my responsibilities as the sponsor.

Sponsor Signature: _____ Date: _____

Printed Name: _____

| FOR OFFICE USE ONLY | | | |
|---|--|--|--|
| <input type="checkbox"/> Site Map | <input type="checkbox"/> Vendor List | <input type="checkbox"/> TFF Applications | <input type="checkbox"/> Payment Received by _____ |
| <input type="checkbox"/> Permit Issued _____ (date) | <input type="checkbox"/> Invoice Issued _____ (date) | <input type="checkbox"/> Amount Due \$ _____ | |

TEMPORARY EVENTS PROGRAM