

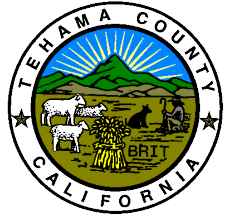
TEHAMA COUNTY PLANNING DEPARTMENT

Jessica Martinez– Director of Planning

444 Oak Street, Room "I", Courthouse Annex Second Floor
Red Bluff, California 96080

Telephone: (530) 527-2200 Email: planning@tehama.gov

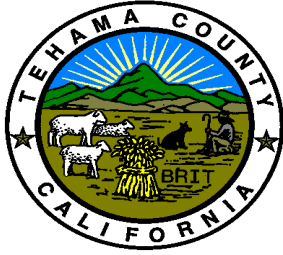
ADMINISTRATIVE USE PERMIT



Fees: \$828.00

ITEMS REQUIRED FOR EVENT VENUES / WINERIES

1. + Master Application Form
2. + Event Management Plan
 - Traffic Management Plan
 - Plot Plan
 - Exhibit Map (designating all surrounding sensitive receptors and other operational limitations)
3. + Completed Tehama County Environmental Health Checklist for each event type
4. + Wineries must submit copy of ABC license
5. + Any additional and supplemental information



DEPARTMENT OF ENVIRONMENTAL HEALTH

633 WASHINGTON STREET, ROOM 36

RED BLUFF, CA 96080

Phone (530) 527-8020 Fax (530) 527-6617

Timothy D. Peters, MD
Health Officer

Tia Branton
Environmental Health Director

SPECIAL EVENT VENUE CHECKLIST "A" **(Must be Completed with Administrative Use Permit)**

Name of Event(s): _____ Length of Event(s): _____

Location of Event(s): _____ Type of Event(s): _____

Admin. Use Permit No.: _____ Phone Number(s): _____

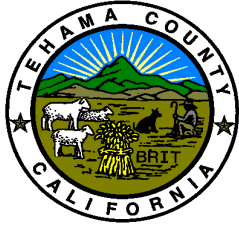
Contact Person(s): _____ E-mail: _____

- ◇ **Submit** a site plan indicating the proposed location(s) for the food facilities, restrooms and all utensil washing, hand washing, trash/garbage areas.
- ◇ **Verify** availability of portable water (test for coliform) annual or quarterly depending on events (if events are scheduled for more than sixty (60) days per year a public water supply permit may be required).
- ◇ **Verify** there are adequate toilet room facilities-at least one toilet facility or each fifteen (15) employees (including volunteers) within two hundred (200) feet of food prep area shall be provided. Each toilet room shall have hot and cold water, hand cleanser and single-use sanitary towels in permanently mounted dispensers.
- ◇ **Verify** that garbage will be properly disposed.
- ◇ Any changes to agreed plan shall be approved **prior** to event.

I hereby acknowledge, by submitting this form that I have read, understand and agree to implement of all requirements above:

Signature: _____

Date: _____



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SPECIAL EVENT VENUE CHECKLIST "B" **(Must Be Completed before EACH Event)**

Name of Event(s): _____ Date(s) & Time(s) of Event(s): _____
Location(s) of Event(s): _____ Type of Event(s): _____
Admin. Use Permit Number: _____ Phone Number(s): _____
Contact Person(s): _____ E-mail: _____

PLEASE COMPLETE THE FOLLOWING AT LEAST TWO (2) WEEKS PRIOR TO THE EVENT:

- ◇ **Submit** a list of Food Vendor(s)/Caterer(s) scheduled to be at the event(s).
- ◇ **Verify** that all food shall come from an approved source. (No home cooked foods are allowed).
- ◇ **Verify** that each Food Vendor(s) is permitted to operate in Tehama County.
- ◇ **Verify** that each vendor(s) and employee(s) of vendors that handle non-prepackaged food have proof of Food Safety Training.
- ◇ **Submit** proposed menu to be offered at event(s).
- ◇ **Submit** water quality testing results.
- ◇ Any changes to agreed plan shall be approved prior to event(s).

I hereby acknowledge, by submitting this form that I read, understand and agree to implement all of the requirements above:

Signature: _____ Date: _____

****Please complete this for and attach proposed menu/water results then return to Environmental Health a minimum of Fourteen (14) days prior to EACH EVENT to be held.****