



County of Amador
ENVIRONMENTAL HEALTH DEPARTMENT

810 Court Street
 Jackson, CA 95642

Catering Standard Operating Procedures

This document will help you prepare the required written description of your proposed catering activities and the equipment and standard operating procedures that you propose to use for your Catering business. All required documents will be reviewed during an in-office consultation. Once these procedures are approved, a field consultation will be required for an onsite evaluation at the proposed commissary location. A signed and APPROVED copy of this document must be maintained with your Catering operation during all operating hours.

Please note that any changes to the menu, equipment, or procedures listed on your approved form will require another review and written approval by Environmental Health.

Catering Business Name: _____ Environmental Health Permit #: _____

Business Owner Name: _____ Phone #: _____

E-mail: _____ Fax #: _____

Mailing Address: _____ City: _____ Zip Code: _____

Documents to Include

✓	Check the following items as you include them with this document.
	Complete and submit an application. Ensure that all information is legible.
	Commissary Agreement- The Caterer must prepare and store all food and equipment at a commissary kitchen (permitted food facility). The Caterer and the proposed commissary must complete and sign the commissary agreement. Caterers operating at host facilities are subject to limited food preparation only (HSC 113818).
	Specification Sheets- Submit specification or cut sheets for your equipment, including the portable mechanical refrigeration, overhead protection/enclosure, and portable hand-washing sink(s) carts that will be utilized during a Catering event. Provide documentation that shows the certification for sanitation and electrical standards by an American National Standards Institute (ANSI) accredited certification program such as NSF, UL, ETL, etc. for all equipment and refrigeration.
	Menu- Include any menus. List all food and beverages items to be sold. (Refer to page 2 & 5)
	Food Protection Manager Certification- Provide proof that an owner or employee has a valid Food Protection Manager certificate or card.
	Food Handler Card- Provide documentation that all employees have a valid food handler card.
	Log- A written log must be maintained for a minimum of 90 days after each operations to include the event organizer name and contact information, location of service, menu of foods and beverages served. When operating at a host facility, the log shall include your menu and location/date/time of operation. Please describe how you will log this information (i.e. What type of database) and provide a sample of that log.

Food Production

1. Indicate the location where you will store food and equipment at the end of the day.

Commissary Name: _____ Environmental Health Permit #: _____

Address: _____

MENU DESCRIPTION <small>(USE ADDITIONAL SHEET ON PAGE 5, IF NECESSARY)</small>		
Indicate all the food and beverage items for sale.	WHERE WILL THE FOOD BE PREPARED?	
FOOD ITEM	COMMISSARY	ON-SITE

**2. List equipment and utensils that will be used. Please be specific on equipment's use and function.
For example: Equipment: Blender Intended use: Make Smoothies**

Equipment	Intended use during food preparation or catering event
Refrigerator	

3. **Transport and Storage-** Describe the procedures for transportation (more than 30 minutes) and storage of food and equipment. Include methods to cold-hold and hot-hold potentially hazardous foods and the methods to hold food until service (e.g., covered chafing dishes, etc.). Include information about the proposed catering enclosure and handsink. Please note that all potential hazardous foods not held at 41°F or below during operation shall be discarded at the end of service.

- Transport Vehicle**
- Interior is constructed of smooth, washable, impervious material.
 - Holding area does not drain liquid to street, sidewalk, or premises.

Hot Holding Method (135°F and above)	During Transport-
	At Event-
Cold Holding Method (41°F and below)	During Transport-
	At Event-
Other Food Storage	During Transport-
	At Event-
Equipment	During Transport-
	At Event-
Enclosure and Handsink	Enclosure-
	Handsink-
Closing Procedures	Food Disposal-
	Transport-

4. Cleaning- Describe the procedures you will use to clean and sanitize food contact surfaces, equipment, and utensils at the commissary.

Indicate the specific sanitizer or sanitizing method that you will use by checking the box below:

Contact with a solution of 100 ppm (parts per million) available chlorine for at least 30 seconds.

Contact with a solution of 200 ppm available quaternary ammonium for at least one minute.

Check the option you will use: Commercial pre-mixed solution or I will prepare my own sanitizer solution

Statements		
Initial next to the below statements indicating that you understand and will abide by them.		
_____	1	A Catering permit may be used to prepare and serve food at private events and host facilities only. Operating at a Community Event or Certified Farmer's Market requires a separate health permit.
_____	2	All food must be stored and prepared at the approved facility. Home preparation of food is prohibited. Only limited food preparation, as defined in CRFC, is allowed at an off-site food service event.
_____	3	When operating at an off-site food service event, a sign or business cards must be posted/ provided at the event premises stating the Caterer's business name, address, and permit number.
_____	4	A plan check fee must be paid prior to each consultative appointment and an operational health permit for a Caterer must be applied and paid for prior to operating.
_____	5	Operating at a host facility is limited to a four (4) hour duration in any one twelve (12) hour period. Upon request, you must provide your operation schedule to Environmental Health for review.
_____	6	At the end of the operational period, all multi-use utensils will be washed and sanitized at the approved commissary/permitted food facility.
_____	7	Have access to potable water.
_____	8	All garbage, refuse and liquid waste will be disposed of in an approved manner as approved by Environmental Health.
_____	9	All equipment, utensils and food related items shall not be stored in a private home when not conducting catering activities.
_____	10	Any food that has become contaminated, suspected of becoming contaminated or presumed unsafe must be discarded.

Acknowledgment

I understand and agree that if I make changes to my operating procedures, I must notify Environmental Health within 7 days. Revised operating procedures may be provided by fax, E-mail: ACEH@amadorgov.org, in person or mailed to one of our offices listed at the on this form. Failure to notify Environmental Health of any changes may result in a Notice of Violation, suspension, or revocation of the Health Permit issued to me to operate as a Caterer. Ensure approvals are obtained from all applicable agencies prior to operation (e.g., fire, zoning, etc.).

Authorized Signature: _____ Date: _____

Print Name: _____ Title: _____



ENVIRONMENTAL HEALTH

AMADOR COUNTY LAND USE AGENCY

Telephone: (209) 223-6439
Fax: (209) 223-6228
Website: www.co.amador.ca.us
E-mail: ACEH@amadorgov.org

County Administration Center • 810 Court Street • Jackson, CA 95642-2132

COMMISSARY VERIFICATION

Catering Operation/Mobile Food Facility

CATERING /MOBILE FOOD FACILITY INFORMATION

Business Name: _____

Owner Name: _____

Owner Mailing Address: _____ City: _____ Zip Code: _____

Phone Number: () _____

The above-mentioned catering operation/mobile food facility shall operate out of an approved commissary and shall report to the commissary at least once each operating day. If the use of the commissary is discontinued, the permit-holder must notify the Environmental Health Department ((209)223-6439 to make the necessary changes.

Signature of Catering Operation/Mobile Food Facility Owner _____ Date _____

COMMISSARY INFORMATION

Commissary Business Name: _____

Commissary Owner's Name: _____

Commissary Address: _____ City: _____ Zip Code: _____

Phone Number: () _____

Type of Facility: Commissary Restaurant Market Other _____

I, the Commissary Owner/Operator, can and will provide the necessary facilities for the above-mentioned Catering Operation/Mobile Food Facility at my permitted facility as checked below:

- | | | |
|--|--|---|
| <input type="checkbox"/> Preparation of food | <input type="checkbox"/> Utensil Wash | <input type="checkbox"/> Store refrigerated/frozen food |
| <input type="checkbox"/> Electrical hook-up | <input type="checkbox"/> Store Dry Food | <input type="checkbox"/> Store Supplies |
| <input type="checkbox"/> Toilet & handwashing | <input type="checkbox"/> Overnight parking | <input type="checkbox"/> Supply food products |
| <input type="checkbox"/> Waste tank sewage disposal facilities | | |

Signature of Commissary Owner _____ Date _____

***Commissary means a food establishment in which food, containers, equipment, or supplies are stored or handled, food is prepared or pre-packaged for sale or service at other locations, utensils are cleaned, and liquid or solid wastes are disposed of.**