

**Environmental Health Division**  
**Food Protection Bureau**  
788 E. Woodoak Lane, Murray, UT 84107-6379  
Phone: 385-468-3845 Fax: 385-468-3846  
SaltLakeHealth.org

## TEMPORARY MASS GATHERING APPLICATION

*Applications will not be reviewed and permits will not be issued unless all requested information on this application is provided. The best way to expedite your application is to accurately complete all items.*

All applications shall be submitted at least 30 days prior to the first day of the gathering. Applications received less than 30 days prior to the event will be assessed a late fee of \$200.00.

A mass gathering permit is valid for 30 consecutive calendar days from the first day of the gathering and is non-transferable.

To review the Salt Lake County Health Department's Temporary Mass Gathering Regulation #17, visit our website at [SaltLakeHealth.org](http://SaltLakeHealth.org)

### GATHERING INFORMATION

Date(s) of Gathering \_\_\_\_\_

Gathering Name \_\_\_\_\_

Gathering Site Name \_\_\_\_\_

Gathering Site Address \_\_\_\_\_

Type of Gathering, (run, walk, fair, concert, etc.) \_\_\_\_\_

Hours of Operation \_\_\_\_\_

Maximum Number of Attendees at Any Given Time \_\_\_\_\_

How long is an attendee likely to be on the site? \_\_\_\_\_ Hours

Maximum Number of Attendees Expected Each Day \_\_\_\_\_

Maximum Number of Attendees over the Entire Gathering  
(including participants, spectators, volunteers) \_\_\_\_\_

Will food be given away or sold?  Yes  No

Will the event have (check all that apply)?  Food Booths  Food Trucks  Food Trailers

Will amplified sound or a public address system be used?  Yes  No

Will there be fireworks?  Yes  No If yes, what time? \_\_\_\_\_ How long? \_\_\_\_\_

Will animals be present?  Yes  No  
If yes, how will the animals be involved?

## GATHERING INFORMATION (continued)

Will there be overnight camping?     **Yes**     **No**

Will there be persons providing personal services (massage, tattoo, cosmetology, etc.) either for a fee or free?

**Yes**     **No**    If yes, please list service and describe the scope of activity. \_\_\_\_\_

Will there be a water feature or water event including pools, foam, bubbles, mud, etc.?     **Yes**     **No**

If yes, describe the scope of activity. \_\_\_\_\_

## OPERATOR/COORDINATOR INFORMATION

The operator is a person, group, corporation, partnership, governing body, association, or other public or private organization legally responsible for the overall operation of the temporary mass gathering. The operator shall establish a headquarters at the gathering site and the operator or operator's designee shall be present at the gathering at *all* times during operating hours. The operator's address is where invoices and permits are mailed.

Operator Name \_\_\_\_\_

Operator's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Operator's Phone Number \_\_\_\_\_ FAX Number \_\_\_\_\_

Operator's E-mail Address \_\_\_\_\_

Contact Person (Person-in-charge) \_\_\_\_\_

Contact Person's Phone Number \_\_\_\_\_

Contact Person's Phone/Text Number While at the Event \_\_\_\_\_

Food Booth Coordinator's Name \_\_\_\_\_

Phone Number \_\_\_\_\_ FAX Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

Food Booth Coordinator's Phone/Text Number While at the Event \_\_\_\_\_

Will the Food Booth Coordinator provide refrigerated food storage trucks?     **Yes**     **No**

**Permit-Holder Information and Terms**

**Upon acceptance of a permit, the permit holder shall:**

- |  |
|--|
| 1. Comply with all provisions of the Salt Lake County Health Department.   |
| 2. Immediately contact the Salt Lake County Health Department to report any changes in the information listed on this application. |
| 3. Immediately notify the Salt Lake County Health Department as soon as the business intends to change ownership or close.         |
| 4. Pay all applicable fees established by the Salt Lake County Health Department in the required time frame.                       |

**I am aware that this application does not authorize conducting a business until final approval is given by this agency and all applicable State and municipal agencies including Business Licensing.** A person shall not operate a regulated facility, business, or establishment without a valid permit issued by the Salt Lake County Health Department. Application fees are non-refundable and permits are not transferable to another individual, business, or location. To open and/or operate a business without final approval is a Class B misdemeanor and punishable by law. Violations of the above conditions of permit may result in follow-up inspection fees, permit suspension or permit revocation. Failure to notify the Salt Lake County Health Department regarding changes in the above information will result in penalties. Payment of these penalties in the required time frame is the responsibility of the business owner/agent.

I, \_\_\_\_\_, Title \_\_\_\_\_, have read and  
(Please Print)

agree to the above conditions of permit. I also declare that all information contained on this application is true and complete.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FEES**

A fee will be assessed and invoiced, per the following schedule.  
**(No permits will be issued until payment has been received and paid in full.)**

2 - 999 ATTENDEES	\$290.00
1000- 4999 ATTENDEES	\$410.00
5000- 9999 ATTENDEES	\$510.00
10,000 OR MORE ATTENDEES	\$575.00
<i>Late submission fee (within 30 days of event)</i>	<i>\$200.00</i>

## RESTROOM and HAND WASH FACILITIES

See Table below for minimum number of toilets required.

Will alcoholic beverages be served/consumed at the gathering?  **Yes**  **No**  
 If yes, the operator shall increase the number of required toilets by 40%.

How many permanent men's toilets are available? \_\_\_\_\_

How many permanent women's toilets are available? \_\_\_\_\_

How many portable toilets (unisex) will the operator supply? \_\_\_\_\_

How many handicap accessible toilets will the operator supply? \_\_\_\_\_  
 (Include both permanent and portable toilets.)

A minimum of one toilet that is accessible by handicapped persons shall be available on site.  
 Additional handicap units shall make up at least five percent of the total number of accessible toilets.

*Note: Races, runs, etc. must have at least one portable toilet per mile along the route.*

How many permanent hand wash stations will be available? \_\_\_\_\_

How many portable hand wash stations will be available? \_\_\_\_\_

A minimum of one hand wash station per 10 toilets or portion thereof shall be provided. A minimum of one hand wash station shall be located at each bank of portable toilets. Hand wash stations consist of liquid soap, water from a container with a handled spigot, a catch basin, and single-use towels. Each station shall have at least one trash can.

Will there be a waste tank for the disposal of liquid waste, hand sink wastewater, grease, etc.?  **Yes**  **No**  
 If no, where will liquid waste be dumped? \_\_\_\_\_

Who is the supplier of portable toilets and handsinks, and waste water tanks?

Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Note: Waste water shall be removed from portable toilets at least every 24 hours, or more frequently as necessary.

**Table for Minimum Numbers of Toilets Required**

Peak Crowd	Average Time at Gathering (hours)									
	1	2	3	4	5	6	7	8	9	10
500	2	4	4	5	6	7	9	9	10	12
1000	4	6	8	8	9	9	11	12	13	13
2000	5	6	9	12	14	16	18	20	23	25
3000	6	9	12	16	20	24	26	30	34	38
4000	8	13	16	22	25	30	35	40	45	50
5000	12	15	20	25	31	38	44	50	56	63
6000	12	15	23	30	38	45	53	60	68	75
7000	12	18	26	35	44	53	61	70	79	88
8000	12	20	30	40	50	60	70	80	90	100
10000	15	25	38	50	63	75	88	100	113	125
12500	18	31	47	63	78	94	109	125	141	156
15000	20	38	56	75	94	113	131	150	169	188
17500	22	44	66	88	109	131	153	175	197	219
20000	25	50	75	100	125	150	175	200	225	250
25000	38	69	99	130	160	191	221	252	282	313
30000	46	82	119	156	192	229	266	302	339	376
35000	53	96	139	181	224	267	310	352	395	438
40000	61	109	158	207	256	305	354	403	452	501
45000	68	123	178	233	288	343	398	453	508	563
50000	76	137	198	259	320	381	442	503	564	626
55000	83	150	217	285	352	419	486	554	621	688
60000	91	164	237	311	384	457	531	604	677	751
65000	98	177	257	336	416	495	575	654	734	813

For each additional 10,000 in attendance add:  
 15      25      38      50      63      75      88      100      113      125

## SOLID WASTE MANAGEMENT AND CLEAN-UP PLAN

The event operator shall have a written contract with a solid waste management company, unless the operator has a plan and the means to do it themselves.

The waste management and site clean-up plan shall:

1. provide for a sufficient number of COVERED waste containers;
2. ensure the containers are emptied as often as necessary to prevent over flowing;
3. ensure that solid waste and litter are cleaned from the property periodically during the gathering;
4. ensure within 24 hours following the close of the gathering, the property is clear of solid waste; and
5. ensure litter is prevented from being blown from the gathering site onto adjacent property.

How many COVERED trash containers will be available to serve the toilet area?

A minimum of one covered trash container shall be located at each bank of portable toilets. A minimum of one covered waste container for every 10 portable toilets or portion thereof is required.

Will the operator handle solid waste management and site clean-up?       **Yes**                       **No**

If no, who is the contractor, under written contract with the operator that will handle the solid waste and site clean-up?

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Phone Number \_\_\_\_\_

If yes, who will be responsible for the solid waste management and site clean-up?


When will the clean-up take place? \_\_\_\_\_

How will the waste be collected and where will it finally be disposed?


Please provide any further pertinent details regarding the event's solid waste and clean-up plan.


# EMERGENCY MEDICAL CARE REQUIREMENTS

How many first aid stations will be provided? \_\_\_\_\_

Each event shall have at least one first aid station. Additional stations may be required by the Health Department, due to the nature of the event, time of year, number of attendees and participants, risk of injuries, or other public health and safety needs.

Each first aid station shall:

1. have the ability to afford privacy to the person receiving care or treatment;
2. be sufficient in size to accommodate the required number of medical providers and the predicted number of sick or injured;
3. be strategically located, clearly marked, and identifiable from every direction as the first aid station; and
4. be easily accessible for emergency personnel and vehicles.

How many, State of Utah licensed or certified medical providers will be present at the event? \_\_\_\_\_

Medical provider qualifications (EMT, Nurse, etc.)? \_\_\_\_\_

Medical provider contact information:

Company Name \_\_\_\_\_

Contact person \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

At least two, State of Utah, licensed or certified medical providers, such as an *emergency medical technician, paramedic, nurse, physician's assistant, or medical doctor* shall be present to staff each first aid station. A gathering having more than 2,500 attendees shall have at least two additional emergency medical providers for each additional 5,000 attendees or fraction thereof.

POPULATION	REQUIREMENT	POPULATION	REQUIREMENT	POPULATION	REQUIREMENT
1 – 3,000	2 EMTs	18,001 – 20,500	10 EMTs	35,501 – 38,000	17 EMTs
3,001 – 5,550	4 EMTs	20,501 – 23,000	11 EMTs	38,001 – 40,500	18 EMTs
5,551 – 8,000	5 EMTs	23,001 – 25,500	12 EMTs	40,501 – 43,000	19 EMTs
8,001 – 10,500	6 EMTs	25,501 – 28,000	13 EMTs	43,001 – 45,500	20 EMTs
10,501 – 13,000	7 EMTs	28,001 – 30,500	14 EMTs	45,501 – 48,000	21 EMTs
13,001 – 15,500	8 EMTs	30,501 – 33,000	15 EMTs	48,001 – 50,501	22 EMTs
15,501 – 18,000	9 EMTs	33,001 – 35,500	16 EMTs		

All medical staff shall have access to telephones or radios to contact 911 or the local emergency medical services. Please notify the appropriate fire department/emergency medical service of the upcoming event and comply with any additional requirements. **Photo identification and current state license(s) are required to be on site at all times of the event and available for verification by the Health Department.**

For details/requirements for providing emergency medical services at the event, see:

[SLCo Health Regulation #17: Temporary Mass Gatherings](#)

Please provide any further pertinent details regarding the event's Emergency Medical Plan.


## FREE WATER STATIONS

The operator shall provide and strategically locate drinking water stations to effectively meet the drinking water needs of attendees, participants, and staff. **At least four drinking water stations are required.** Additional drinking water stations may be required due to seasonal climatic conditions, nature of the event, or other public health related criteria. When containers are used to dispense free water at the required water stations, the operator shall provide single-use drinking containers.

All drinking water shall be from a Health Department approved safe drinking water supply. All bottled water used or distributed shall be approved by the Utah Department of Agriculture and Food. Safe drinking water hauled to and dispensed at the gathering shall be in a manner that protects public health. This includes, but is not limited to, the use of only food grade containers and hoses. **The use of a yard or garden hose is prohibited**, as they do not qualify as food grade equipment. The operator shall ensure there is no potential for backflow/siphonage into a public potable water supply. All hose connections for potable water shall be above the ground.

How many existing/approved drinking water sources are on site? \_\_\_\_\_  
(Permanent and **operational** drinking fountains, etc.)

How many additional water stations will be set up? \_\_\_\_\_

Please describe:

How will the water stations be set up? \_\_\_\_\_

Where is the water source coming from? \_\_\_\_\_

Who will be responsible for monitoring and maintaining the supply of free water, restocking drinking cups, and ensuring any containers used remain sanitary?


Please provide any further pertinent details regarding the event's free water stations.


**LIGHTING, ELECTRICAL, AND SOUND SYSTEM PLAN**

Will the event be held after daylight hours?       **Yes**       **No**

If the temporary event will be held after daylight, there must be adequate lighting to ensure the comfort and safety of the attendees, participants, and staff. Lighting is required in the parking areas as well as on the event site.

If yes, is the event site equipped with sufficient permanent lighting?       **Yes**       **No**

If there is not permanent lighting, what type of lighting source and number of lighting fixtures will be used?


What electrical source will be used?


Electrical sources may include permanently installed electrical systems, generators, and use of extension cords in compliance with the local building code.

Please indicate how the public will be protected from generators, electrical plugs and cords as tripping hazards or electrical shock. Please take into account plugs near water, and any other hazardous devices.


Will there be amplified sound or a public address system?       **Yes**       **No**

If yes, who will be setting up the sound system?

Company Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Are there any residential dwellings or hotel/motels surrounding the gathering site?       **Yes**       **No**

Who will be responsible for controlling the volume level during the gathering?

Contact \_\_\_\_\_ On-site Phone # \_\_\_\_\_

Salt Lake County Health Department Regulation #21 Noise Control, specifies noise, such as fireworks, music or amplified sound, shall not be heard in a way that is excessive nor unnecessary. Sound level restrictions and noise curfews are in effect throughout the valley, please contact 385-468-3835 for further information or review the Community Noise Control Regulation online at our website: <http://www.slcohealth.org/envRegs/reg21CommunNoisePolluCtl.html>



## FOOD BOOTH REQUIREMENTS

1. Each food booth shall have a posted **Temporary Food Permit**.
  - a. Please carefully note the following:
    - i. Temporary Food Permits must be obtained from the SLCoHD Food Protection Bureau at least **12 days prior** to the event date or a **late fee of \$35** will be assessed per permit.
    - ii. Booths only serving foods that are not potentially hazardous and that are commercially pre-packaged in individual serving portions or uncut, whole fruits and or vegetables may not be required to have a Temporary Food Permit. All vendors should contact the SLCOHD Food Protection Bureau to determine if permits are required.
    - iii. A restaurant with an annual food establishment permit must still obtain a Temporary Food Permit to operate a food booth outside of its permitted building. Food carts, trailers and mobile food units with permanent permits are not required to obtain temporary permits to operate at events, but must operate within the requirements of their permanent permit.
2. At least one person shall be present in the food booth with a current **Food Handler Card** at all times.
3. Each food booth shall meet the following minimum structural requirements:
  - a. A roof, awning or other covering, impermeable to weather, over the entire food preparation, service, clean-up and storage area;
  - b. Two side walls (not screening) which will reduce the entry of dust and dirt, and exclude non-authorized persons;
  - c. The front service wall shall be a counter, half-wall, or table draped to the floor. The back wall may be open for employee access, or solid if desired;
  - d. The floor shall be plywood, concrete, asphalt or other acceptable cleanable material. Flooring shall be provided if the vending site is on dirt, gravel, grass, or a poorly drained surface;
  - e. All cooking equipment utilized at the food booths shall be at least 4 feet from the public by roping off or by other means for safety reasons, as per FDA/CFP Guide. (Conference for Food Protection); and
  - f. All open flamed cooking devices shall meet the requirements of the local fire code. Contact your local fire department to inquire what distance is required between the cooking unit and the walls and ceiling of the booth. Charcoal and wood burning devices are not recommended by the FDA/CFP.
4. If additional back up refrigeration units are supplied for the food vendors, the operator shall ensure the equipment is holding food temperatures at 41°F or lower. Backup refrigeration trucks are for cold holding purposes only; they are not designed to cool food product.
5. Each food booth shall be equipped with a hand wash station. Hand wash stations in restrooms do not qualify. A permanently plumbed sink is not required. At a minimum, there shall be a container with a handled spigot, which can stay open on its own to allow for water to flow freely so that a person can wash both hands at the same time, a catch basin or bucket, liquid hand soap, covered waste receptacle, and paper towels. All waste water collected shall be disposed of properly in an approved waste water container or sewer system.

**ANY FOOD BOOTH WITHOUT A HANDWASH STATION OR  
TEMPORARY FOOD EVENT PERMIT WILL BE CLOSED IMMEDIATELY.**

In order to apply for a Temporary Food Event Permit, you must apply “in-person” at:

Food Protection Bureau, 788 E. Woodoak Lane (5400 S.)  
Between the hours of 8 AM to 4:30 PM, Monday – Friday

For further information, call 385-468-3845 or visit our website at:  
<http://www.slcohealth.org/programs/foodProtection/tempFoodBooths.html>

## FOOD SAFETY CONTINGENCY PLAN

1. What action will you take when you find a food vendor with no Salt Lake County Health Dept. permit?


2. What action will you take when you find a food vendor with no hand washing station?


3. What action will you take when you find food was stored overnight in the food booth?


4. What action will you take if you see grey water being dumped in the storm drain?


5. What action will you take if you see a food vendor using Sternos?


6. What action will you take if you see a food vendor vomiting?


7. What action will you take if you see a food vendor with a small child in the booth?


8. Please provide any further pertinent details regarding the event's food safety plan.


**FOOD VENDOR LIST (Including booths, trucks, and trailers)**  
**Vendors are the person(s) or entity who is selling/giving away the food.**

**1.**  
Vendor business name \_\_\_\_\_  
Vendor contact name \_\_\_\_\_  
Phone number \_\_\_\_\_ Fax number \_\_\_\_\_  
Food being served \_\_\_\_\_

**2.**  
Vendor business name \_\_\_\_\_  
Vendor contact name \_\_\_\_\_  
Phone number \_\_\_\_\_ Fax number \_\_\_\_\_  
Food being served \_\_\_\_\_

**3.**  
Vendor business name \_\_\_\_\_  
Vendor contact name \_\_\_\_\_  
Phone number \_\_\_\_\_ Fax number \_\_\_\_\_  
Food being served \_\_\_\_\_

**4.**  
Vendor business name \_\_\_\_\_  
Vendor contact name \_\_\_\_\_  
Phone number \_\_\_\_\_ Fax number \_\_\_\_\_  
Food being served \_\_\_\_\_

**5.**  
Vendor business name \_\_\_\_\_  
Vendor contact name \_\_\_\_\_  
Phone number \_\_\_\_\_ Fax number \_\_\_\_\_  
Food being served \_\_\_\_\_

**6.**  
Vendor business name \_\_\_\_\_  
Vendor contact name \_\_\_\_\_  
Phone number \_\_\_\_\_ Fax number \_\_\_\_\_  
Food being served \_\_\_\_\_

**7.**  
Vendor business name \_\_\_\_\_  
Vendor contact name \_\_\_\_\_  
Phone number \_\_\_\_\_ Fax number \_\_\_\_\_  
Food being served \_\_\_\_\_

*Attach additional sheets if necessary.*

## SITE PLAN AND DIRECTIONAL SIGNS

**Note: SUFFICIENT SIGNAGE shall be required for identifying and directing attendees, participants and staff to: all entrance and exit locations, the operator's headquarters, first aid station(s), restrooms, and free drinking water facilities.** All lettering shall be in a color and design that is in high contrast with the background and of an appropriate font size to be clearly visible and easily read from anywhere on the gathering site. Signage on the first aid station(s) shall be posted in all directions for everyone to clearly identify. All signage shall be in compliance with local fire and building codes. If a gathering is held at night time, all exit signs and exit markings shall be illuminated. Additionally, within an enclosed building, illuminated low level exit signs and directional markings shall be required.

### SITE PLAN MAP

PLEASE ATTACH A MAP OF YOUR GATHERING SITE.

**A site plan of the area where the gathering will take place, including the following details, shall be submitted.**

(A hand drawn map of reasonable scale is acceptable.)

1. Show parking areas available and designate areas for handicapped, attendees, participants, and staff both those under the control of the operator and others which may be used off site for the gathering;

All parking areas used for the gathering and under the control of the gathering operator must meet the requirements of the Temporary Mass Gathering Regulation # 17. A gathering that provides overnight parking for occupied recreational vehicles, shall comply with State Rule R392-301 Recreational Vehicle Park Sanitation and local recreational park regulations.

2. Location of the entrances and exits designated for attendees, participants, and staff, including placements of directional signs leading to these locations, as well as any interior walks and roadways (Please detail emergency vehicle access and mark in which direction traffic will flow on the interior roadways);
3. Location of the operator's headquarters, including the placement of directional signage showing this location;
4. Location of food booths;
5. Location of restrooms, indicating which are handicap, and hand wash stations, both permanent and portable, including placement of directional signs leading to these facilities;

Portable toilets shall be located a minimum of 100 feet from any food-service operation and not more than 300 feet from a grand stand, spectator area, or from other areas of activity which pertain to the gathering.

Portable toilets shall be located a minimum of \_\_\_\_ feet from watershed sources? And \_\_\_\_ feet from storm drains.

6. Location of solid waste receptacles;
7. Location of waste water tanks, if unable to directly connect to the sanitary sewer system;
8. Location of free drinking water stations including placement of directional signs leading to these stations; See Page 7 for details
9. Location of lighting, if event takes place after daylight hours;
10. Location of electrical power sources;
11. Location of stage and sound equipment, indicating the direction they are pointing; and
12. Location of the first aid station(s), including the placement of directional signage showing this facility, emergency vehicle parking, and emergency vehicle ingress and egress routes.

## NUISANCE CONTROL & HAZARDOUS CONDITIONS PLAN

A contingency plan shall be developed prior to the event. It shall be available upon request, at any time, to a Health Department inspector. This plan shall provide for and include, but not be limited to:

1. The maintenance, safety, and sanitary conditions of the event's facilities and the gathering site. This includes plans to eliminate tripping hazards, such as exposed electrical cords, electrical outlets, hoses and any other protruding objects, which could result in injury;
2. Adequate on site drainage to prevent flooding and water-related nuisances on adjacent properties;
3. The elimination of any infestation of vermin within any part of a structure intended for occupancy, food storage, or restroom facilities, prior to, during, and immediately following a gathering;
4. The elimination of any nuisance pertaining to an animal participating in the gathering prior to, during, and immediately following the gathering; and
5. The immediate abatement of any such condition that may create a nuisance, health hazard, unsanitary or dangerous condition. This includes, but is not limited to, plans for evacuation, delays, and provisions for support facilities to provide protection to the attendees, participants, and staff. Plans shall also include procedures to manage various weather/climatic conditions that could occur during a gathering such as the removal of snow, prevention of slippery/wet surfaces, or protection from seasonal temperature exposures, thunder/lightning storms, strong winds, severe storms, or any other natural event.

Please provide any further pertinent details regarding the event's Nuisance and Hazardous Conditions Plan.
