



GASTON COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES

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Gaston County Environmental Health Checklist for Temporary Food Establishment Vendors

The following is a checklist to assist a vendor in setting up a Temporary Food Establishment (TFE). All items on the checklist are necessary to obtain a permit for a TFE; however, additional requirements may be applicable. All applications must be submitted to the Gaston County Health Department **at least 15 days prior to the date of the event.**

Employee requirements

- Gloves
- Employee Health Policy Agreement
- Hat, hair net, or visor

Tent/weather proof structure/ canopy

- Canopy over entire operation (smokers are not required to be under a canopy)

Fly protection

- 3 solid or mesh sides
- Fly fans

Ground covering

- Protection from dust/ mud (in absence of asphalt, concrete, or grass)

Water supply

- Approved water source (requires testing by Gaston County if private well)
- Drinking water hose(s)- must be labeled
- A means to heat water

Waste water disposal

- Buckets/ grey water containers- must be labeled
- Disposal in approved sewage system or port-a-johns

Utensil washing

- 3 basins (large enough to fit equipment)
- Drain board or counter space for air drying
- Soapy water, rinse water, sanitizer
- Sanitizer test strips

Handwashing station

- At least 2 gallons of hot water under pressure
- Free-flowing faucet/ stopcock
- Liquid Soap and disposable towels
- Wastewater catch bucket- must be labeled

Approved/ protected/ secured food

- Approved source/ food invoices
- Food storage above ground
- Separate vegetable washing sink (when preparing/ serving ready-to-eat vegetables)

Food temperatures

- Accurate food thermometer
- Cold holding: refrigeration/ freezer/ coolers with ice
- Hot holding equipment

Food shields/ customer barriers

- No food exposed to customers
- Approved self-service condiments

Lighting (for night-time operations)

- Shielded above food/ preparation

I certify that I will comply with the requirements listed above and any other requirements as described by Gaston County Environmental Health while operating my Temporary Food Establishment:

Vendor Signature: _____ Date: _____