

Fulton County Department of Health and Wellness
Environmental Health Services Division
Central District Office
99 Jesse Hill Jr., Drive, S.E., Room 101, Atlanta, GA 30303
Telephone 404-730-1301 • FAX 404-7301462



SPECIAL EVENTS

ORGANIZER INFORMATION PACKET



SPECIAL EVENT FOOD VENDORS BASIC REQUIREMENTS

Fulton County Department of Health and Wellness
Environmental Health Services Division

- Each food vendor must provide signage with name of booth for identification.
- Each food vendor must have approved hand washing station, which will be a container with free flowing water faucet.
- Each food vendor must have a stem thermometer for taking hot and cold food temperatures.
- Each food vendor booth must have screening on all four sides as long as this does not conflict with codes the fire marshal has to enforce. If there is, then the organizer of the event will need to help in creating a solution. Screening requirements will be as follows:
- No rolled up screening,
 - Screening must be securely attached at top and not attached with shower curtain design.
 - Must be secured at all four corners.
 - Must be attached to with stand normal weather conditions.
 - Screening for doors must over lap side screening.
 - Window openings must be no greater than 24 inches by 24 inches.
 - Screening must be at least 16 mesh to the inch.

The above items must be in place before a special event food permit will be issued.

Special Event Fee Schedule

Type	Fee	Inspection Fee Per Day	Item Number
Special Event Plan Review	\$100		14
Special event Organizer Non-Food Permit (1-30 unit)	\$75	\$50	89 & 47
Special Event Organizer Non- Food Permit (31-75 units)	\$75	\$100	90 & 48
Special Event Organizer Non-Food Permit (76+ units)	\$75	\$150	90 & 49
Special Event Food Service Permit – Low Risk	\$50	\$25	91 & 50
Special Event Food Service Permit – High Risk	\$50	\$50	92 & 51
Special Event Non-Food Permit- Charitable Organization	0		93
Special Event Food Permit- Charitable Organization	0		94
Special Food Vendor License	\$150		46



APPLICATION FOR PERMIT TO OPERATE A SPECIAL FOOD SERVICE

Fulton County Department of Health and Wellness
Environmental Health Services Division

EVENT
INFORMATION

Name: _____
Address: _____
Street City State Zip Code
Date(s) of Event: _____

ORGANIZER
INFORMATION

Name: _____
Address: _____
Street City State Zip Code
Telephone #: _____ Email: _____

VENDOR
INFORMATION

Name: _____ Name of Booth: _____
Address: _____
Street City State Zip Code
Telephone #: _____ Email: _____

Food(s) to be served: _____

I, _____, certify that all information given in this application is true and correct to the best of
Vendor Name (Print)
my knowledge. I further understand and agree to comply with Fulton County Code of Ordinances and Code of Resolutions, Chapter 34, Health and Sanitation, Article V, "Food Service", as the holder of a permit to operate a special food service in Fulton County. If a permit is issued, it is non-transferable and is valid until it is surrendered, suspended, revoked or expired. Preferred Contact Method: Telephone Email Fax

Vendor Signature Certification # Title Date

===== For EHS use only =====

Food Risk Type: Low Risk High Risk Establishment Code: _____
Permit#: _____

Fee Amount: _____ Date of Remittance: ___/___/___ Check/M.O.: _____
Receipt: _____

Permit Issue Date: ___/___/___ Permit Expiration Date: ___/___/___ District Assignment: _____ Territory: _____

EHS Staff Date of Issuance

Food Risk Category Factor
Summary
(Permit Fee)

