Event Coordinator Plan Review

Please submit this plan review at least 30 days prior to your event. The plan review fee covers an hour and a half of plan review time. Additional plan review time will be billed to the Event Coordinator at $60 per hour. Non-profit coordinators please provide official non-profit documentation instead of the fee. All coordinators please include your list of vendors including non-profit food vendors. If vendors do not have a Mesa County Approval letter please have them contact our department directly.

EVENT INFORMATION

Name of the Event: ____________________________________________________________

Date(s) of the Event: ____________________________________________________________

Location of the Event: ____________________________________________________________

Hour of the Event: (Days and times) ______________________________________________

Last year’s attendance: _______________________________ Expected attendance this year: ____________

Anticipated Number of Food Booths: ____________ (Complete attached Vendor Information Lis)

Event Coordinator Company: ______________________________________________________

Coordinator Contact Person’s Name: ________________________________________________

Coordinator’s Phone Number: (______)______________________________________________

Coordinator’s Fax Number: ________________________________________________________

Coordinator’s Mailing Address: ____________________________________________________

City_________________________ State_________ Zip Code __________

Coordinator’s E-mail address: ______________________________________________________

Contact Person during the Event (if different from above): ______________________________

Contact phone number for the day of the Event: (______)________________________________
SERVICES PROVIDED ON-SITE TO FOOD VENDORS (Check all that apply and provide detail if necessary):

Water Supply: □ There is access to a potable water tap(s) on site.  
□ Vendors must bring their own water supplies.

Wastewater: □ There will be liquid waste collection tanks / receptacles on site.  
□ Vendors must arrange for their own wastewater disposal.

Electricity: □ There will be no electricity supplied on site.  
□ There is access to electricity on site.  
□ Generators will be provided for vendor use.  
□ Vendors are allowed to use generators on site.

Trash / Refuse: □ There will be trash receptacles throughout the event for the public.  
□ There will be dumpsters on site for vendors and public trash removal.  
How often will they be serviced? ______________________________

Toilet Facilities: □ Toilets in permanently plumbed public restrooms. How many? _____  
□ Portable toilets. How many? _____  
How often will they be serviced? ______________________________

□ Portable hand wash stations. How many? _____  
How often will they be serviced? ______________________________

Commissary Kitchen: Location: ________________________________  
□ Commissary has facilities to wash, rinse and sanitize utensils  
□ Commissary has facilities to cold hold  
□ Commissary has facilities to wash and prepare produce

Other Services: □ Ice  
□ Refrigerated truck (Supervision MUST be provided throughout the event and someone must be available to adjust temperature/repair truck during event.)

Will there be a petting zoo at the even?  Y or  N  

Will there be a carnival at the event?  Y or  N  

Will they be providing food?  Y or  N  

If providing food, please provide carnival contact information.
Name: __________________________________________________________________________
Phone Number: __________________________ E-mail: ________________________________

Will there be any pools at the event?  Y or  N  If yes, please provide contact person and phone number:
____________________________________________________________________________________

Will there be any body art or piercing vendors at the event?  Y or  N  If yes, please provide vendor names:
____________________________________________________________________________________
TEMPORARY EVENT SITE MAP
Provide a labeled map of the entire Temporary Event area and include the following:
☐ Toilet facilities (portable and fixed)
☐ Hand washing facilities (portable and fixed)
☐ Trash can and dumpster locations
☐ Electrical hook-up points and generator locations
☐ Potable water taps for vendors
☐ Food booth vendors
☐ Roadways, sidewalks, and walkways
☐ Carnival food vendors (if applicable)
☐ Refrigerated truck (if applicable)
☐ Ice truck (if applicable)
☐ Commissary kitchen (if applicable)
☐ Petting Zoo, Body Art/ Piercing, Pools, etc (if applicable)

Submit to:
Las Animas Huerfano Counties District Health Department
412 Benedicta Avenue
Trinidad, CO 81082
719-846-2213 Ext 23
rheupel@la-h-health.org
**Vendor Information List**

Please complete and submit at least two weeks prior to event. **Please indicate (Yes/No) in the last column if you have received the vendor’s Mesa County Approval letter. Vendors are not approved to operate until you have received their Mesa County Approval letter.**

<table>
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<tr>
<th>Booth #</th>
<th>Vendor/Booth Name</th>
<th>Contact Person Name</th>
<th>Contact Number</th>
<th>Contact E-mail</th>
<th>Mesa County Approval?</th>
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