

# EVENT SAFETY

## Outdoor and Mobile Catering



Event Name:

Location:

Dates:

### Food Business Operator Details:

Name:

Business Name:

Address:

Business Address:

Mobile:

Email:

Which Local Authority is your business registered with:

Hygiene Rating

Describe the format of your food safety management procedures:

Date of last inspection:

### Vehicle and Food Details:

No. of vehicles/stalls to be brought onto site

Type of structure

Stall

Purpose Built Vehicle

Tent

Converted vehicle

Other (please specify)

Registration No's

Name each type of food to be prepared/sold

(alternatively attach a menu card)

If any food products are prepared or stored in a place other than the vending vehicle or stall, please state what is done and where:

Please indicate the following facilities you intend to provide on site

Sink(s)	Hot water supply to the sink	Soap	First Aid Kit
Wash hand basin	Hot water supply to the basin	Hand drying facilities	Refrigerator
Freezer	Cooking hob(s)	Oven(s)*	Microwave(s)
Grill	Other	<input type="text"/>	

*If you have any of these appliances you should have a powder or CO2 fire extinguisher (blue or black) and a fire blanket.*

Please indicate all power sources:

Diesel	Petrol	Liquefied petroleum gas	<input type="text"/>	Date of last inspection
Other	<input type="text"/>	Electrical generator	<input type="text"/>	

What date will you arrive on site?

Date:  Time:  :

What other event/s have you attended recently:

What days will you be trading?

S M T W T F S

Have you been  
to this event  
before?

Details of any food hygiene training:

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PRINT NAME:

Signature:

Capacity:

Date:

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Please send this completed form AT LEAST 14 days BEFORE the event:

**Environmental Health**  
Burnley Borough Council, Governance, Law and Regulation  
1st Floor Offices, Parker Lane Burnley BB11 2BY