



Environmental Health ♦ 463 Aviation Blvd, Santa Rosa, CA 95403 ♦ 707-565-6565 ♦ [EH@sonomacounty.gov](mailto:EH@sonomacounty.gov)

<https://sonomacounty.gov/environmentalhealth>

### COMMUNITY EVENT ORGANIZER PERMIT APPLICATION

**DUE 30 DAYS BEFORE EVENT**

California law requires that in addition to the permit issued to each complying temporary food facility, a permit shall be obtained by the person or organization responsible for facilities or equipment that are shared by two or more temporary food facilities operating at a community event. Permits are required for multiple day events, including events that occur on nonconsecutive days throughout the year.

Original application     Renewal     Includes a Certified Farmer's Market

Event Name HEALDSBURG FUTURE FARMERS COUNTRY FAIR Event Date & Time MAY 20-23, 2020 Time  
Location RECREATION PARK City HEALDSBURG State CA Zip 95448  
Organization Name HEALDSBURG FUTURE FARMERS COUNTRY FAIR Owner Name NON-PROFIT (E01-36)  
Organizer's Name PHIL MANOUKIAN Phone [REDACTED]  
Organizer's Mailing Address [REDACTED]  
City HEALDSBURG State CA Zip 95448 E-mail [REDACTED]

Community Event Organizer Permits	Application Materials Received on Time	Hourly Rate
2 - 5 Food Vendors	\$ 804.00	\$ 261.00
6 - 19 Vendors	\$ 1254.00	\$ 261.00
20 + Vendors	\$ 1786.00	\$ 261.00

Maximum number of food facilities at the event: 6-19 Fee Enclosed \$ 1254

This application submittal includes applicable fees and all information listed below:

- Completed Community Event Organizer Permit Application (this page).
- Completed Digital Vendor List spreadsheet (template provided by EH) Note: Each food vendor must obtain a temporary Food Facility permit prior to operating.
- Completed Community Event Organizer Requirements form (page 3)
- A detailed site plan indicating:
  - Location of the event
  - Proposed locations of all food vendors
  - Source and location of the potable water supply to each facility
  - Location of all garbage receptacles
  - Location of all shared handwashing, utensil washing, and janitorial facilities
  - Location of wastewater disposal (and used cooking oil disposal, if applicable)
  - Location and number of all toilet and handwashing facilities

I understand that I am responsible for ensuring that the food vendors operating at this event are in compliance with the California Retail Food Code. I have read and understand the attached Community Event Organizer Guidelines.

Vendors found operating at the event without a permit may be charged up to three times the permit fee or be required to leave the event.

Print Name/Title PHIL MANOUKIAN - DIRECTOR Signature [REDACTED] Date 4/11/2020  
(1 OF 25)

For office use only:

PE 3747 PR# \_\_\_\_\_ FA# \_\_\_\_\_ District 23 Issue Permit \_\_\_\_\_ Approved by \_\_\_\_\_  
 Cash  Check/Credit Card Trans# \_\_\_\_\_ Date Rec'd by SBW Amount Rec'd \$ 1254

*Phil W / BOA Jural Louder*

July 2025

**COMMUNITY EVENT ORGANIZER REQUIREMENTS**

Community event organizers are required to complete and submit this form.

**1. RESTROOM FACILITIES**

- a. Number of toilets provided or available: 25 (+) \*Location(s) shown on site plan?  Yes \_\_\_ No
- b. Number of handwashing facilities provided or available: 5  
\*Location(s) shown on site plan?  Yes \_\_\_ No

*Note:* At least one toilet facility for each 15 employees shall be provided within 200 feet of each food facility. Each toilet shall be provided with hand washing facilities equipped with warm and cold running water, hand washing cleanser and single-use sanitary towels in permanently installed dispensers.

**2. WATER SUPPLY**

- a. Source of potable water supply (e.g., spigot, self-contained fresh water tank) HEALDSBURG DOMESTIC SERVICE  
\*Location(s) shown on site plan?  Yes \_\_\_ No \*Size of fresh water tank (gallons) 0
- b. Warm or hot potable water supply available to food facilities? Location YES, @ CONCESSION BLDG.
- c. Running potable water delivered to each booth? \_\_\_ Yes  No  
\*If no, location(s) where food facilities may obtain water shown on site plan? X Yes \_\_\_ No (SEE POTABLE @ SITE PLAN)
- d. Food grade hoses and sanitary connections provided? X Yes \_\_\_ No

**3. GARBAGE & LIQUID WASTE**

- a. Number of garbage containers provided: 20 (+) \*Location(s) shown on site plan?  Yes \_\_\_ No
- b. Number of wastewater tanks 0 Size of wastewater tank(s) (PUBLIC SANITARY SEWER @ CONCESSION)  
\*Location(s) shown on site plan?  Yes \_\_\_ No
- c. Janitorial facilities available at the event?  Yes \_\_\_ No  
\*Location(s) shown on site plan?  Yes \_\_\_ No
- d. Containers provided for disposal of used cooking oil? \_\_\_ Yes \_\_\_ No (X NA)  
\*Location(s) shown on site plan? \_\_\_ Yes \_\_\_ No

**4. ANIMAL CONTROL**

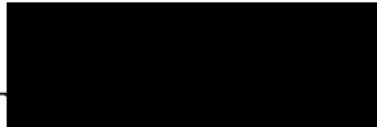
- a. Signs posted at all entrances advising no live animals are permitted within 20 feet of food facilities?  
 Yes \_\_\_ No
- b. Event staff personnel available to ensure no animals are permitted within 20 feet of food facilities?  
 Yes \_\_\_ No

**5. ELECTRICAL POWER**

- a. Adequate lighting is provided for events that occur at night or indoors?  Yes \_\_\_ No
- b. Electrical power provided for food equipment at each food booth?  Yes \_\_\_ No
- c. For events scheduled consecutively for more than one day, continuous supply of electricity provided to power refrigerators overnight?  Yes \_\_\_ No

Print Name/Title PHIL MANOUKIAN

Signature



Date 4/1/2026

SUBMIT TO:  
 Board of Supervisors  
 575 Administration Dr, Ste 100A  
 Santa Rosa, CA 95403

# COUNTY OF SONOMA

For Board of Supervisors Use Only

## Fee Waiver/Board Sponsorship Request Form

1. Contact information for individual requesting fee waiver/sponsorship:

Name: PHIL MANOUKIAN  
First Middle Last

Mailing Address: [REDACTED] HEALDSBURG CA 95448  
Number, Street, Apt./Suite City State Zip

Phone: [REDACTED] Email: [REDACTED]  
Area Code, Number

2. Name of Community Based Organization, Non-Profit, or Government Agency for which fee waiver/sponsorship is requested:

Name: HEALDSBURG FUTURE FARMER COUNTRY FAIR (H.F.F.C.F.)

Mailing Address: P.O. Box 763, HEALDSBURG, CA 95448  
Number, Street, Apt./Suite City State Zip

Phone: [REDACTED] Email: HEALDSBURGFAIR@GMAIL.COM  
Area Code, Number

3. Please indicate by check mark the supervisory district in which the organization or agency submitting this request is located, where the project/activity/event will be held, and the district office to whom you would like to submit this request:

Board Member and District	Rebecca Hermosillo District 1	David Rabbitt District 2	Chris Coursey District 3	James Gore District 4	Lynda Hopkins District 5
Entity or organization location (select all that apply)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Project/activity/event location (select all that apply)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
District office to receive request (select only one)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

4. Type of Community Based Organization, Non-profit, or Government Agency for which the fee waiver/sponsorship is requested:

- City                       Special District                       Other Local Government  
 School                       Non-profit or CBO

Other (please specify): \_\_\_\_\_

5. Please provide a description of the project/activity/event for which a fee waiver/sponsorship is being requested on a separate sheet of paper. Please include the number of individuals who will participate or be served, etc.

6. Please indicate if this is a one-time or annual event:       One Time       Annual

7. Type and amount of fee waiver/sponsorship requested. Please list all County fees you are requesting be waived/sponsored in conjunction with this project/activity/event. Please attach a copy of an estimate or receipt from the County Department or Veteran's Building Operator documenting the amount of each fee you are requesting be waived/sponsored.

Department Assessing Fee	Type of Fee	Amount of Fee
SONOMA COUNTY DEPT. HEALTH	APPLICATION/OVERSIGHT	\$1,254
SONOMA COUNTY DEPT HEALTH	TEFF VENDOR PERMIT (SINGLE EVENT)	\$3,969
TOTAL		\$5,223

8. If your Community Based Organization, Non-Profit, or Governmental Agency has received a fee waiver/sponsorship for a similar project/activity/event in the past, please list below:

Date of Fee Waiver	Department Assessing Fee	Type of Fee	Amount of Fee
/ /	∅	∅	∅
/ /	↓	↓	↓
/ /	↓	↓	↓
/ /	↓	↓	↓


9. Does the organization or agency for which the fee waiver/sponsorship is requested receive funding from any of the following sources? If so, please specify:

- Property Tax                       Sales Tax                       Special Assessment  
 User Fees

Other (please specify): SELF SUPPORTING/FUND RAISING

10. If you checked any of the boxes in number 9 above, please provide an explanation and supporting documentation regarding the inability of the organization or agency to pay the fees which you are requesting be waived/sponsored. Please attach to this form and submit with your request.

11. Will the organization or agency be charging an entry fee or be requesting a donation for the project/activity/event for which you are requesting a fee waiver/sponsorship? If so, please provide an explanation detailing why the fees to be waived/sponsored cannot be recovered through the entry fee. Please attach to this form and submit with your request. NO ENTRY FEES

  
 \_\_\_\_\_  
 Authorized Signature  
 4 / 11 / 2026  
 \_\_\_\_\_  
 Date

HEALDSBURG FAIR - DIRECTOR  
 \_\_\_\_\_  
 Title

Hello Supervisor James Gore. Please accept this note from me/us on behalf of the entire *Healdsburg Future Farmers Country Fair* Board of Directors. My name is Phil Manoukian, a member of the HFFCF Board of Directors, and have been tasked to organize the food booths/food safety, at the 2026 HFFCF.

A very brief history of the HFFCF includes our founding in 1949, and continuous operation since 1950. Our Board of Directors has always been, and continues to be completely volunteer. We provide opportunities for work experience for local youth/students through 'learn by doing' with various projects, including: livestock/animal husbandry, vineyard/crop science, public speaking, mechanics, arts, cooking, woodworking, steel fabrication, etc. We also provide scholarship monies for youth/students that pursue secondary education at traditional 4-year universities, junior college, and trade schools. The options are limitless, and we provide opportunities to youth/students that would not have these options without the resources we provide.

You may be aware of our traditional 'Kick-Off' event as being the annual Healdsburg Fair Twilight Parade. To paraphrase the great Yogi Berra, 90% of the town, (along with thousands of others), comes out to watch the Parade, while the other 50% are actually marching in it. In a 'Nutshell': if you are not in it, you are marching in it. The Healdsburg Fiscal Calendar starts on the "Twilight Parade" Thursday Night prior to Memorial Day! If there is truly one aspect that epitomizes the heart and soul of this town, it's the Healdsburg Fair.

As alluded to, the Healdsburg Fair has been in continuous operation, Memorial Weekend, since 1950. This year, the Fair will run May 21st-23rd.

In addition to our support of local youth/students, we provide opportunity for local not-for-profit community groups to raise funds. No commercial vendors are allowed. All funds are also directed to local youth/students. The not-for-profit organizations include: community groups, (Kiwanis, Rotary, Corazon), churches, schools, 4-H groups, Boosters, Boy/Cub/Girl Scouts, sports teams, neighborhood groups, etc. For most of these organizations, the Healdsburg Fair is the largest/only fund-raising opportunity for the year. All profits go directly into local youth programs these organizations sponsor.

Most of these groups sell food items as part of their offerings. It is all typical fairway offerings: hamburgers, corn dogs, popcorn/street corn/caramel corn, fudge, BBQ plates, funnel cakes, brownies/cookies, slushies, etc. Included are pre-packaged offerings such as canned/bottled drinks and chips, etc.

These groups and booths are staffed by local volunteers, with several 3 generation-strong teams. The booths are simple, homemade structures, or modified trailers, which perfectly capture the spirit of our event.

We provide a space and power to each of these groups for a very nominal fee only. (Our fees cover the hard costs of power boxes, cables, turf mats, etc.).

This brings us to the 'crux of the matter'. The current fee schedule for the Sonoma County Food Handling Safety requirements is a deal breaker. Our Fair and community groups are very modest, and operate on such a tight margin, that these requirements would greatly reduce the opportunities/abilities they/we provide to our local youth. (\$350-\$650 would effectively eliminate 70%-100% (+/-), of our organizations).

It is with this in mind that am contacting my Supervisor, you, James Gore. I understand times are changing, and when it comes to food safety, "the 5 second rule" will no longer suffice. But there is no reason why we cannot provide safe and fun food fare, at our Fair. My request from you is that Sonoma County waives fees for the food booths, the HFFCF agrees to enforce all food handling safety requirements, (as stipulated within the Sonoma County 'Temporary Food Facility Application), and that we also provide a location for hot water and access to public sanitary sewers.

It is our intent to comply with your requirements for food handling safety, without jeopardizing our long-established community model, that maintains the unique quaintness of the Healdsburg Fair. I look forward to working with you/your office to make all this work.

On behalf of the HFFCF Board of Directors, thank you for your time, commitment to community, and consideration to our concerns.

Sincerely,

Jess Ascoop, President, Healdsburg Fair

Susie Garcia, Chair, Healdsburg Fair Twilight Parade

Phil Manoukian, Chair, Healdsburg Fair Food/Game Booths

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<https://sonomacounty.gov/environmentalhealth>

### Temporary Food Facility (TFF) Permit Application

Submit complete application 30 calendar days prior to the event. **Incomplete applications will not be accepted and will be returned.**  
 Applications submitted less than 7 days prior may not allow sufficient processing time to obtain a permit.  
 A penalty fee of up to three times the permit fee may be assessed for operating without a permit at an event.

Applying for:  New Permit  Renewal of Permit - PR #P

TFF Type:  Booth  Truck/Trailer  Cart  Inside a Building Soft Serve:  Yes  No

Business Name HFFCF Owner/Operator Name PHIL MANOUKIAN  
 DBA (Name on Sign at Booth) WARM SPRINGS 4-H OCC Type of Food ICE CREAM BARS  
 Mailing Address [REDACTED] City HBO State CA Zip 95448  
 Phone [REDACTED] On-Site Phone SAME  
 Email [REDACTED] Website Ø

#### Section I - Food to Be Sold/Served

List Food Items to Be Sold/Served	Check if Commercially Pre-Packaged	Check if Pre-Packaged At Commissary	Identify Types of Preparation at Booth		
			Check all that apply. Check N/A if Not Applicable		
<u>ICE CREAM (DOME BAR)</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly (N/A)	<input type="checkbox"/> Portioning	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> N/A	<input type="checkbox"/> Other (Specify): <u>Sold Prepack</u>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly	<input type="checkbox"/> Portioning	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> N/A	<input type="checkbox"/> Other (Specify): _____	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly	<input type="checkbox"/> Portioning	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> N/A	<input type="checkbox"/> Other (Specify): _____	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly	<input type="checkbox"/> Portioning	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> N/A	<input type="checkbox"/> Other (Specify): _____	

At the end of the operating day, destroy all potentially hazardous foods that were required to be held at or below 45°F.  
 At the end of the operating day, destroy all potentially hazardous foods that were required to be held at or above 135°F.

If you are changing your menu or preparation level check with our office to determine if you need to resubmit a new TFF permit application. To avoid late fees, please submit changes 30 calendar days prior to the event.

#### Section II - Food Preparation and Storage

All food preparation must be conducted in the approved TFF or at a permitted food facility.

Will food be prepared or stored off-site prior to the event?  Yes  No

If yes, Name of Location \_\_\_\_\_

If yes, a Commissary Agreement or a copy of your Cottage Food Operation Permit or Registration must be submitted with this application.

**For office use only:**

PE# 3T21 PR# \_\_\_\_\_ Entered by \_\_\_\_\_ Approval by \_\_\_\_\_ Date \_\_\_\_\_  
 5 Consecutive Days or Less Permit is valid from 5.20.26 to 5.23.26  
 Cash  Check  Credit Card Trans# \_\_\_\_\_ Date Rec'd \_\_\_\_\_ by \_\_\_\_\_ Amount Rec'd \$ 223-



Section III - List of Community Events

Please list the community events you propose to operate at in the next 12 months in Sonoma County.

If you decide to add events later, please resubmit this page with the new events listed. Changes must be submitted 30 calendar days prior to the event.

Please attach an additional sheet if you need to list more events, be sure to include the name of the TFF at the top.

Name of Event: HEALDSBURG FUTURE FARMERS COUNTRY FAIR  Event Is Less Than Four Hours Name

of Event Organizer: HEALDSBURG FAIR- BOARD OF DIRECTORS Booth #: 6-19

TFF Person in Charge: PHIL MANOUKIAN

TFF Contact Phone for Day of Event: [REDACTED]

Event Address: 515 PIPER STREET City: HEALDSBURG, CA, 95418

Event Day(s) of the Week: WED- SAT Date(s) of Event: MAY 20-23, 2026

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: [REDACTED]

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

### Section IV - TFF Construction

- TFF is within a permanent building/structure - no need to list materials in this section  
 TFF is outdoors/not within a building/structure - please list materials in this section

All TFFs require:

- A washable floor, such as asphalt, concrete or tarp
- Overhead protection, such as canopy or canvas

Moderate and Extensive preparation TFFs must also be constructed with:

- Four (4) sides and pass-through windows

Please see Temporary Food Facility Self-Inspection Checklist for a fuller description of requirements.

Floor Material: MAT Wall Material: TENT VINYL  
 Ceiling Material: TENT VINYL Size of Pass-Through Window: VARIABLE

### Section V - Food Protection

Identify methods to protect foods from contamination. Check all that apply.

- Sneeze Guards  Only Pre-Packaged Food or Bottled Drinks  
 Hinged Chafing Dishes  Prepared and Stored Away from the Customers  
 N/A  Other (Specify): \_\_\_\_\_

### Section VI - Sink Requirements

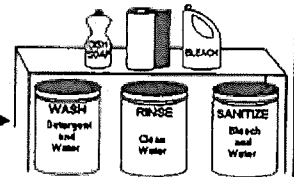
Warewashing sink provided by (check only one):

- Event Organizer  
 TFF Operator  
 Not Required - special conditions only - see the Self-Inspection Checklist

Type of warewashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink - required if event is more than 3 consecutive days  
 Self-Contained Portable Sink  
 Pre-Packaged Only (exempt from requirement)  
 Wash, Rinse and Sanitize - using three compartments/containers, such as 5-gallon buckets - is only allowed if event is less than 3 consecutive days.  
 Special Conditions Apply - no warewashing required - see the Self-Inspection Checklist

Example →



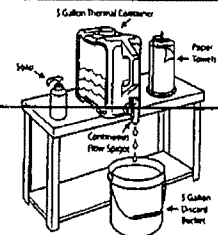
Handwashing sink provided by (check only one): SINK AVAIL.

- Event Organizer  
 TFF Operator

Type of handwashing sink. Check only one.

- Permanently Plumbed Sink - required if event is more than 3 consecutive days  
 Gravity-Fed Unit - is only allowed if event is less than 3 consecutive days  
 Self-Contained Portable Sink

Example →



### Section VII - Equipment/Utensils Used

Multi-use consumer eating and drinking utensils are prohibited: plates, glassware, etc.

Identify all equipment that will be used in food preparation at the TFF. Check all that apply.

- Barbecue Grill  Range Burner  Deep Fryer  Griddle  Charbroiler  Mixer  Blender  
 N/A  Other (Specify): FREEZER

Will multi-use kitchen utensils be used inside the TFF for food preparation: knives, scoops, spatulas, bowls, etc.?

- Yes  No

### Section VIII - Hot/Cold Holding Equipment

Identify methods of maintaining food hot or cold during hours of operation. Check all that apply.

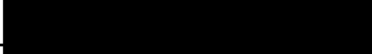
- Cold Holding**
- Mechanical Refrigeration  Ice Chest  Cold Table  
 N/A  Other (Specify): \_\_\_\_\_
- Hot Holding**
- Steam Table  Chafing Dishes  Electric Soup Warmer  
 Hot Holding Cabinet  Hot Dog Roller Grill  Electric Rice Cooker/Warmer  
 N/A  Other (Specify): \_\_\_\_\_  
 List Hot Held items: \_\_\_\_\_

**TFF Permit Fees Effective July 1, 2025**

Permit Type* - Please choose the permit you are applying for below		Fee	Reduced Fee Waiver (must meet requirements)
	<b>Annual</b>		
<input type="checkbox"/>	Extensive Preparation	\$627.00	
<input type="checkbox"/>	Moderate Preparation	\$463.00	
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$321.00	
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$263.00	<del>\$168.00</del>
	<b>5 Consecutive Days or Less</b>		
<input type="checkbox"/>	Extensive Preparation	\$516.00	
<input type="checkbox"/>	Moderate Preparation	\$379.00	<del>\$340.00</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$282.00	\$253.00
<input checked="" type="checkbox"/>	Prepackaged/No Food Preparation	\$223.00	\$125.00
<input type="checkbox"/>	<b>Veteran's Exempt Food Facility</b>	No Fee	

I certify that all information included in this application is true and correct. I certify that I have the authority to sign this application. I am 18 years of age or over and understand that picture ID is required. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that this application must be complete to be considered for submittal.

I understand that the failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of my approval to operate and/or may result in the filing of misdemeanor criminal charges.

Print Name/Title PHIL MANOUKIAN Signature  Date 4/1/2026

Print Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only:**

REHS' Notes



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Applying for:  New Permit  Renewal of Permit - PR #P

TFF Type:  Booth  Truck/Trailer  Cart  Inside a Building Soft Serve:  Yes  No

Business Name HFFCF Owner/Operator Name PHIL MANOUKIAN  
 DBA (Name on Sign at Booth) WCA OCU Type of Food SNACKS/BEVERAGES  
 Mailing Address [Redacted] City HBG State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone [Redacted] On-Site Phone SAME  
 Email [Redacted] Website [Redacted]

Section I - Food to Be Sold/Served			
List Food Items to Be Sold/Served	Check if Commercially Pre-Packaged	Check if Pre-Packaged At Commissary	Identify Types of Preparation at Booth <i>Check all that apply. Check N/A if Not Applicable</i>
CHIPS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly (N/A) <input type="checkbox"/> Portioning <input type="checkbox"/> Cooking <input type="checkbox"/> Other (Specify): _____
DRINKS SOFTS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> Portioning <input type="checkbox"/> Cooking <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Other (Specify): _____
CANDY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> Portioning <input type="checkbox"/> Cooking <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Other (Specify): _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> Portioning <input type="checkbox"/> Cooking <input type="checkbox"/> N/A <input type="checkbox"/> Other (Specify): _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> Portioning <input type="checkbox"/> Cooking <input type="checkbox"/> N/A <input type="checkbox"/> Other (Specify): _____

At the end of the operating day, destroy all potentially hazardous foods that were required to be held at or below 45°F.  
 At the end of the operating day, destroy all potentially hazardous foods that were required to be held at or above 135°F.

If you are changing your menu or preparation level check with our office to determine if you need to resubmit a new TFF permit application. To avoid late fees, please submit changes 30 calendar days prior to the event.

**Section II - Food Preparation and Storage**  
 All food preparation must be conducted in the approved TFF or at a permitted food facility.

Will food be prepared or stored off-site prior to the event?  Yes  No

If yes, Name of Location \_\_\_\_\_

If yes, a Commissary Agreement or a copy of your Cottage Food Operation Permit or Registration must be submitted with this application.

**For office use only:**

PE# 3T21 PR# \_\_\_\_\_ Entered by \_\_\_\_\_ Approval by \_\_\_\_\_ Date \_\_\_\_\_  
 5 Consecutive Days or Less Permit is valid from 5.20.26 to 5.23.26  
 Cash  Check  Credit Card Trans# \_\_\_\_\_ Date Rec'd 5.8.26 by EP Amount Rec'd \$ 223-



**Section III – List of Community Events**

Please list the community events you propose to operate at in the next 12 months in Sonoma County.

If you decide to add events later, please resubmit this page with the new events listed. Changes must be submitted 30 calendar days prior to the event.

Please attach an additional sheet if you need to list more events, be sure to include the name of the TFF at the top.

Name of Event: HEALDSBURG FUTURE FARMERS COUNTRY FAIR  Event Is Less Than Four Hours Name

of Event Organizer: HEALDSBURG FAIR- BOARD OF DIRECTORS Booth #: 6-19

TFF Person in Charge: PHIL MANOUKIAN

TFF Contact Phone for Day of Event: [REDACTED]

Event Address: 515 PIPER STREET City: HEALDSBURG, CA, 95448

Event Day(s) of the Week: WED- SAT Date(s) of Event: MAY 20-23, 2026

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: [REDACTED]

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

### Section IV – TFF Construction

- TFF is within a permanent building/structure – no need to list materials in this section  
 TFF is outdoors/not within a building/structure – please list materials in this section

All TFFs require:

- A washable floor, such as asphalt, concrete or tarp
- Overhead protection, such as canopy or canvas

Moderate and Extensive preparation TFFs must also be constructed with:

- Four (4) sides and pass-through windows

Please see Temporary Food Facility Self-Inspection Checklist for a fuller description of requirements.

Floor Material: MAT Wall Material: E  
 Ceiling Material: VINYL TENT Size of Pass-Through Window: VARIABLE

### Section V – Food Protection

Identify methods to protect foods from contamination. Check all that apply.

- Sneeze Guards  Only Pre-Packaged Food or Bottled Drinks  
 Hinged Chafing Dishes Prepared and Stored Away from the Customers  
 N/A  Other (Specify): \_\_\_\_\_

### Section VI – Sink Requirements

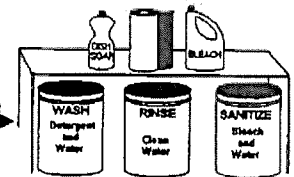
Warewashing sink provided by (check only one):

- Event Organizer  
 TFF Operator  
 Not Required – special conditions only – see the Self-Inspection Checklist

Type of warewashing sink. Check only one. SINK AVAIL

- Permanently Plumbed Sink – required if event is more than 3 consecutive days  
 Self-Contained Portable Sink  
 Pre-Packaged Only (exempt from requirement)  
 Wash, Rinse and Sanitize – using three compartments/containers, such as 5-gallon buckets – is only allowed if event is less than 3 consecutive days.  
 Special Conditions Apply – no warewashing required – see the Self-Inspection Checklist

Example →



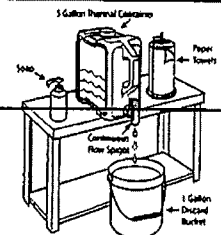
Handwashing sink provided by (check only one):

- Event Organizer  
 TFF Operator

Type of handwashing sink. Check only one. SINK AVAIL

- Permanently Plumbed Sink – required if event is more than 3 consecutive days  
 Gravity-Fed Unit – is only allowed if event is less than 3 consecutive days  
 Self-Contained Portable Sink

Example →



### Section VII – Equipment/Utensils Used

Multi-use consumer eating and drinking utensils are prohibited: plates, glassware, etc.

Identify all equipment that will be used in food preparation at the TFF. Check all that apply.

- Barbecue Grill  Range Burner  Deep Fryer  Griddle  Charbroiler  Mixer  Blender  
 N/A  Other (Specify): \_\_\_\_\_

Will multi-use kitchen utensils be used inside the TFF for food preparation: knives, scoops, spatulas, bowls, etc.?

- Yes  No

### Section VIII -- Hot/Cold Holding Equipment

Identify methods of maintaining food hot or cold during hours of operation. Check all that apply.

#### Cold Holding

- Mechanical Refrigeration  Ice Chest  Cold Table  
 N/A  Other (Specify): \_\_\_\_\_

#### Hot Holding

- Steam Table  Chafing Dishes  Electric Soup Warmer  
 Hot Holding Cabinet  Hot Dog Roller Grill  Electric Rice Cooker/Warmer  
 N/A  Other (Specify): \_\_\_\_\_  
 List Hot Held items: \_\_\_\_\_

**TFF Permit Fees Effective July 1, 2025**

Permit Type* - Please choose the permit you are applying for below		Fee	Reduced Fee Waiver (must meet requirements)
<b>Annual</b>			
<input type="checkbox"/>	Extensive Preparation	\$627.00	
<input type="checkbox"/>	Moderate Preparation	\$463.00	
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$321.00	
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$263.00	<del>\$168.00</del>
<b>5 Consecutive Days or Less</b>			
<input type="checkbox"/>	Extensive Preparation	\$516.00	
<input type="checkbox"/>	Moderate Preparation	\$379.00	<del>\$340.00</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$282.00	\$253.00
<input checked="" type="checkbox"/>	Prepackaged/No Food Preparation	\$223.00	\$125.00
<input type="checkbox"/>	Veteran's Exempt Food Facility	No Fee	

I certify that all information included in this application is true and correct. I certify that I have the authority to sign this application. I am 18 years of age or over and understand that picture ID is required. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that this application must be complete to be considered for submittal.

I understand that the failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of my approval to operate and/or may result in the filing of misdemeanor criminal charges.

Print Name/Title PHIL MANOUKIAN Signature  Date 4/1/2026

Print Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only:**

REHS' Notes



Environmental Health ♦ 463 Aviation Blvd, Santa Rosa, CA 95403 ♦ 707-565-6565 ♦ [EH@sonomacounty.gov](mailto:EH@sonomacounty.gov)  
<https://sonomacounty.gov/environmentalhealth>

### Temporary Food Facility (TFF) Permit Application

Submit complete application 30 calendar days prior to the event. Incomplete applications will not be accepted and will be returned.  
 Applications submitted less than 7 days prior may not allow sufficient processing time to obtain a permit.  
 A penalty fee of up to three times the permit fee may be assessed for operating without a permit at an event.

Applying for:  New Permit  Renewal of Permit - PR #P

TFF Type:  Booth  Truck/Trailer  Cart  Inside a Building Soft Serve:  Yes  No

Business Name WFFCF Owner/Operator Name PHIL MANOUKIAN  
 DBA (Name on Sign at Booth) GATEWAY OCU Type of Food SLUSH/SNOW/CONE  
 Mailing Address [REDACTED] City HDS State CA Zip 95448  
 Phone [REDACTED] On-Site Phone SAME  
 Email [REDACTED] Website [REDACTED]

#### Section I - Food to Be Sold/Served

List Food Items to Be Sold/Served	Check if Commercially Pre-Packaged	Check if Pre-Packaged At Commissary	Identify Types of Preparation at Booth		
			Check all that apply. Check N/A if Not Applicable		
<u>ICE SLUSH</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> (N/A)	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking

At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or below 45°F.  
 At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or above 135°F.

If you are changing your menu or preparation level check with our office to determine if you need to resubmit a new TFF permit application. To avoid late fees, please submit changes 30 calendar days prior to the event.

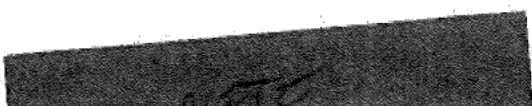
#### Section II - Food Preparation and Storage

All food preparation must be conducted in the approved TFF or at a permitted food facility.

Will food be prepared or stored off-site prior to the event?  Yes  No  
 If yes, Name of Location \_\_\_\_\_  
 If yes, a Commissary Agreement or a copy of your Cottage Food Operation Permit or Registration must be submitted with this application.

**For office use only:**

PE# 3724 PR# \_\_\_\_\_ Entered by \_\_\_\_\_ Approval by \_\_\_\_\_ Date \_\_\_\_\_  
 5 Consecutive Days or Less Permits valid from 5-20-26 to 5-23-26  
 Cash  Check  Credit Card Trans# \_\_\_\_\_ Date Rec'd 5-26 by EP Amount Rec'd \$ 282



**Section III – List of Community Events**

Please list the community events you propose to operate at in the next 12 months in Sonoma County.

If you decide to add events later, please resubmit this page with the new events listed. Changes must be submitted 30 calendar days prior to the event.

Please attach an additional sheet if you need to list more events, be sure to include the name of the TFF at the top.

Name of Event: HEALDSBURG FUTURE FARMERS COUNTRY FAIR  Event Is Less Than Four Hours Name

of Event Organizer: HEALDSBURG FAIR- BOARD OF DIRECTORS Booth #: 6-19

TFF Person in Charge: PHIL MANOUKIAN

TFF Contact Phone for Day of Event: [REDACTED]

Event Address: 515 PIPER STREET City: HEALDSBURG, CA, 95448

Event Day(s) of the Week: WED- SAT Date(s) of Event: MAY 20-23, 2026

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: [REDACTED]

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

### Section IV – TFF Construction

- TFF is within a permanent building/structure – no need to list materials in this section  
 TFF is outdoors/not within a building/structure – please list materials in this section

All TFFs require:

- A washable floor, such as asphalt, concrete or tarp
- Overhead protection, such as canopy or canvas

Moderate and Extensive preparation TFFs must also be constructed with:

- Four (4) sides and pass-through windows

Please see Temporary Food Facility Self-Inspection Checklist for a fuller description of requirements.

Floor Material: VINYL

Wall Material: PAINTED WOOD

Ceiling Material: PAINTED WOOD

Size of Pass-Through Window: 2' # (±)

### Section V – Food Protection

Identify methods to protect foods from contamination. Check all that apply.

- Sneeze Guards  
 Hinged Chafing Dishes  
 N/A
- Only Pre-Packaged Food or Bottled Drinks  
 Prepared and Stored Away from the Customers  
 Other (Specify): \_\_\_\_\_

### Section VI – Sink Requirements

Warewashing sink provided by (check only one):

- Event Organizer  
 TFF Operator  
 Not Required – special conditions only – see the Self-Inspection Checklist

Type of warewashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink – **required if event is more than 3 consecutive days**  
 Self-Contained Portable Sink  
 Pre-Packaged Only (exempt from requirement)  
 Wash, Rinse and Sanitize – using three compartments/containers, such as 5-gallon buckets – **is only allowed if event is less than 3 consecutive days.**  
 Special Conditions Apply – no warewashing required – see the Self-Inspection Checklist

Example →



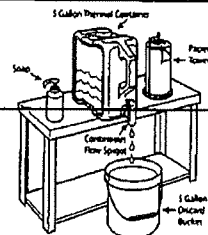
Handwashing sink provided by (check only one):

- Event Organizer  
 TFF Operator

Type of handwashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink – **required if event is more than 3 consecutive days**  
 Gravity-Fed Unit – **is only allowed if event is less than 3 consecutive days**  
 Self-Contained Portable Sink

Example →



### Section VII – Equipment/Utensils Used

Multi-use consumer eating and drinking utensils are prohibited: plates, glassware, etc.

Identify all equipment that will be used in food preparation at the TFF. Check all that apply.

- Barbecue Grill     Range Burner     Deep Fryer     Griddle     Charbroile     Mixer     Blender  
 N/A     Other (Specify): \_\_\_\_\_

Will multi-use kitchen utensils be used inside the TFF for food preparation: knives, scoops, spatulas, bowls, etc.?

- Yes     No

### Section VIII -- Hot/Cold Holding Equipment

Identify methods of maintaining food hot or cold during hours of operation. Check all that apply.

#### Cold Holding

- Mechanical Refrigeration  
 N/A
- Ice Chest  
 Other (Specify): \_\_\_\_\_
- Cold Table

#### Hot Holding

- Steam Table  
 Hot Holding Cabinet  
 N/A
- Chafing Dishes  
 Hot Dog Roller Grill  
 Other (Specify): \_\_\_\_\_
- Electric Soup Warmer  
 Electric Rice Cooker/Warmer
- List Hot Held items: \_\_\_\_\_

**TFF Permit Fees Effective July 1, 2025**

Permit Type* - Please choose the permit you are applying for below		Fee	Reduced Fee Waiver (must meet requirements)
	<b>Annual</b>		
<input type="checkbox"/>	Extensive Preparation	\$627.00	
<input type="checkbox"/>	Moderate Preparation	\$463.00	<del>1/2</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$321.00	
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$263.00	<del>\$168.00</del>
	<b>5 Consecutive Days or Less</b>		
<input type="checkbox"/>	Extensive Preparation	\$516.00	
<input type="checkbox"/>	Moderate Preparation	\$379.00	<del>\$340.00</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	<u>\$282.00</u>	\$253.00
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$223.00	\$125.00
<input type="checkbox"/>	<b>Veteran's Exempt Food Facility</b>	No Fee	

I certify that all information included in this application is true and correct. I certify that I have the authority to sign this application. I am 18 years of age or over and understand that picture ID is required. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that this application must be complete to be considered for submittal.

I understand that the failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of my approval to operate and/or may result in the filing of misdemeanor criminal charges.

Print Name/Title PHIL MANOUKIAN Signature  Date 4/1/2026

Print Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only:**

REHS' Notes



Environmental Health ♦ 463 Aviation Blvd, Santa Rosa, CA 95403 ♦ 707-565-6565 ♦ [EH@sonomacounty.gov](mailto:EH@sonomacounty.gov)  
<https://sonomacounty.gov/environmentalhealth>

### Temporary Food Facility (TFF) Permit Application

Submit complete application 30 calendar days prior to the event. Incomplete applications will not be accepted and will be returned.  
 Applications submitted less than 7 days prior may not allow sufficient processing time to obtain a permit.  
 A penalty fee of up to three times the permit fee may be assessed for operating without a permit at an event.

Applying for:  New Permit  Renewal of Permit - PR #P

TFF Type:  Booth  Truck/Trailer  Cart  Inside a Building Soft Serve:  Yes  No

Business Name HFFCF Owner/Operator Name PHIL MANOUKIAN  
 DBA (Name on Sign at Booth) DRY CREEK NEIGHBORS OCC Type of Food FUDGE/COFFEE  
 Mailing Address [REDACTED] City HQA State CA Zip 95418  
 Phone [REDACTED] On-Site Phone SAME  
 Email [REDACTED] Website [REDACTED]

#### Section I - Food to Be Sold/Served

List Food Items to Be Sold/Served	Check if Commercially Pre-Packaged	Check if Pre-Packaged At Commissary	Identify Types of Preparation at Booth		
			Check all that apply. Check N/A if Not Applicable		
FUDGE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> Assembly <input checked="" type="checkbox"/> (N/A)	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking
MARSHMALLOW STICKS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking
COFFEE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input checked="" type="checkbox"/> Other (Specify): <u>BREWING</u>	<input type="checkbox"/> Cooking
PACKAGED LEMONAID	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Other (Specify): <u>ADD WATER</u>	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking

At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or below 45°F.  
 At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or above 135°F.

*note: no Espresso*

If you are changing your menu or preparation level check with our office to determine if you need to resubmit a new TFF permit application. To avoid late fees, please submit changes 30 calendar days prior to the event.

#### Section II - Food Preparation and Storage

All food preparation must be conducted in the approved TFF or at a permitted food facility.

Will food be prepared or stored off-site prior to the event?  Yes  No  
 If yes, Name of Location Trentadue  
 If yes, a Commissary Agreement or a copy of your Cottage Food Operation Permit or Registration must be submitted with this application.

**For office use only:**

PE# 3T24 PR# \_\_\_\_\_ Entered by \_\_\_\_\_ Approval by \_\_\_\_\_ Date \_\_\_\_\_  
 5 Consecutive Days or Less Permit is valid from 5-20-26 to 5-23-26  
 Cash  Check  Credit Card Trans# \_\_\_\_\_ Date Rec'd 5-8-26 by EP Amount Rec'd \$ 282



**Section III – List of Community Events**

Please list the community events you propose to operate at in the next 12 months in Sonoma County.

If you decide to add events later, please resubmit this page with the new events listed. Changes must be submitted 30 calendar days prior to the event.

Please attach an additional sheet if you need to list more events, be sure to include the name of the TFF at the top.

Name of Event: HEALDSBURG FUTURE FARMERS COUNTRY FAIR  Event Is Less Than Four Hours Name

of Event Organizer: HEALDSBURG FAIR- BOARD OF DIRECTORS Booth #: 6-19

TFF Person in Charge: PHIL MANOUKIAN

TFF Contact Phone for Day of Event: [REDACTED]

Event Address: 515 PIPER STREET City: HEALDSBURG, CA, 95448

Event Day(s) of the Week: WED- SAT Date(s) of Event: MAY 20-23, 2026

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: [REDACTED]

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

### Section IV – TFF Construction

- TFF is within a permanent building/structure – no need to list materials in this section  
 TFF is outdoors/not within a building/structure – please list materials in this section

All TFFs require:

- A washable floor, such as asphalt, concrete or tarp
- Overhead protection, such as canopy or canvas

Moderate and Extensive preparation TFFs must also be constructed with:

- Four (4) sides and pass-through windows

Please see Temporary Food Facility Self-Inspection Checklist for a fuller description of requirements.

Floor Material: VINYL FLOORING Wall Material: PAINTED WOOD  
 Ceiling Material: PAINTED WOOD Size of Pass-Through Window: 2' #

### Section V – Food Protection

*Identify methods to protect foods from contamination. Check all that apply.*

- |  |   |
|--|---|
| <input type="checkbox"/> Sneeze Guards         | <input checked="" type="checkbox"/> Only Pre-Packaged Food or Bottled Drinks    |
| <input type="checkbox"/> Hinged Chafing Dishes | <input checked="" type="checkbox"/> Prepared and Stored Away from the Customers |
| <input checked="" type="checkbox"/> N/A        | <input checked="" type="checkbox"/> Other (Specify): <u>COFFEE</u>              |

### Section VI – Sink Requirements

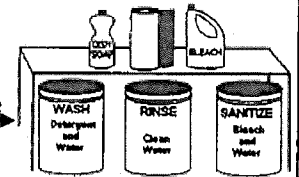
Warewashing sink provided by (check only one):

- Event Organizer  
 TFF Operator  
 Not Required – special conditions only – see the Self-Inspection Checklist

Type of warewashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink – **required if event is more than 3 consecutive days**  
 Self-Contained Portable Sink  
 Pre-Packaged Only (exempt from requirement)  
 Wash, Rinse and Sanitize – using three compartments/containers, such as 5-gallon buckets – **is only allowed if event is less than 3 consecutive days.**  
 Special Conditions Apply – no warewashing required – see the Self-Inspection Checklist

Example →



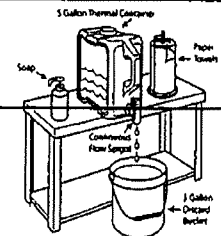
Handwashing sink provided by (check only one):

- Event Organizer  
 TFF Operator

Type of handwashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink – **required if event is more than 3 consecutive days**  
 Gravity-Fed Unit – **is only allowed if event is less than 3 consecutive days**  
 Self-Contained Portable Sink

Example →



### Section VII – Equipment/Utensils Used

**Multi-use consumer eating and drinking utensils are prohibited: plates, glassware, etc.**

Identify all equipment that will be used in food preparation at the TFF. Check all that apply.

- Barbecue Grill    Range Burner    Deep Fryer    Griddle    Charbroile    Mixer    Blender  
 N/A    Other (Specify): COFFEE BREWING

Will multi-use kitchen utensils be used inside the TFF for food preparation: knives, scoops, spatulas, bowls, etc.?

- Yes    No

### Section VIII -- Hot/Cold Holding Equipment

*Identify methods of maintaining food hot or cold during hours of operation. Check all that apply.*

- |   |  |  |
|---|--|--|
| <p><b>Cold Holding</b></p> <p><input type="checkbox"/> Mechanical Refrigeration<br/> <input checked="" type="checkbox"/> N/A</p>  | <p><input type="checkbox"/> Ice Chest<br/> <input type="checkbox"/> Other (Specify): _____</p>   | <p><input type="checkbox"/> Cold Table</p>   |
| <p><b>Hot Holding</b></p> <p><input type="checkbox"/> Steam Table<br/> <input type="checkbox"/> Hot Holding Cabinet<br/> <input checked="" type="checkbox"/> N/A<br/> <input type="checkbox"/> List Hot Held items: _____</p> | <p><input type="checkbox"/> Chafing Dishes<br/> <input type="checkbox"/> Hot Dog Roller Grill<br/> <input type="checkbox"/> Other (Specify): _____</p> | <p><input type="checkbox"/> Electric Soup Warmer<br/> <input type="checkbox"/> Electric Rice Cooker/Warmer</p> |

TFF Permit Fees Effective July 1, 2025

Permit Type* - Please choose the permit you are applying for below		Fee	Reduced Fee Waiver (must meet requirements)
	<b>Annual</b>		
<input type="checkbox"/>	Extensive Preparation	\$627.00	
<input type="checkbox"/>	Moderate Preparation	\$463.00	
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$321.00	
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$263.00	<del>\$168.00</del>
	<b>5 Consecutive Days or Less</b>		
<input type="checkbox"/>	Extensive Preparation	\$516.00	
<input type="checkbox"/>	Moderate Preparation	\$379.00	<del>\$340.00</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	<del>\$282.00</del>	\$253.00
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$223.00	\$125.00
<input type="checkbox"/>	<b>Veteran's Exempt Food Facility</b>	No Fee	

I certify that all information included in this application is true and correct. I certify that I have the authority to sign this application. I am 18 years of age or over and understand that picture ID is required. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that this application must be complete to be considered for submittal.

I understand that the failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of my approval to operate and/or may result in the filing of misdemeanor criminal charges.

Print Name/Title PHIL MANOUKIAN Signature  Date 4/1/2026

Print Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only:**

REHS' Notes

# Sonoma county

DEPARTMENT OF HEALTH SERVICES

Environmental Health ♦ 629 5th Street, Santa Rosa, CA 95404 ♦ 707-565-6565 ♦ [ehs@sonoma-county.org](mailto:ehs@sonoma-county.org)  
<https://www.sonoma-county.ca.gov/Health/Environmental-Health-and-Safety/>

## COMMISSARY AGREEMENT

Mobile Food Facility ♦ Caterer ♦ Temporary Food Facility

Please complete Sections 1 and 2. If your commissary is outside of Sonoma County please also complete Section 3.

Section 1 - To be completed by APPLICANT - Please print or type.

Business Name Dry Creek Neighbors PR # \_\_\_\_\_  
Owner/Operator Name Club - Gail Paquette Email Address \_\_\_\_\_  
Business Mailing Address \_\_\_\_\_ Site # \_\_\_\_\_  
City Healdsburg State CA Zip 95448 Home Phone \_\_\_\_\_ Bus. Phone \_\_\_\_\_

I, \_\_\_\_\_ hereby state that the above information is current, true and correct to the best of my knowledge and agree to utilize my approved commissary in accordance with the California Health & Safety Code, California Retail Food Code, and Sonoma County Environmental Health and Safety, requirements. Note: If this Commissary Agreement is modified or cancelled, and a new Commissary Agreement is not provided to this office, your permit to operate a food facility will be subject to suspension or revocation. This Commissary Agreement shall be effective for no longer than one year.

Print Name/Title Gail Paquette - Treasurer Signature \_\_\_\_\_ Date 4.16.20

Section 2 - To be completed by COMMISSARY OWNER/OPERATOR - Please print or type.

Commissary Name Trentadue Winery PR # 0006445  
Address \_\_\_\_\_ Bus. Phone \_\_\_\_\_  
City Geyserville, CA Zip 95441 Owner/Operator Victor Trentadue

Check all appropriate services provided:

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Wastewater disposal           | <input checked="" type="checkbox"/> Food preparation area           | <input checked="" type="checkbox"/> Refrigeration equipment |
| <input checked="" type="checkbox"/> Potable water                 | <input checked="" type="checkbox"/> Electrical hookups              | <input checked="" type="checkbox"/> Food storage facilities |
| <input checked="" type="checkbox"/> Disposal of rubbish & garbage | <input checked="" type="checkbox"/> Toilet & handwashing facilities | <input checked="" type="checkbox"/> Janitorial sink         |
| <input type="checkbox"/> Hot & cold water for vehicle cleaning    | <input checked="" type="checkbox"/> 3-compartment sink              | <input type="checkbox"/> Overnight vehicle storage          |
| <input type="checkbox"/> Other services not listed:               |   |   |

(EP)

List all foods provided by the commissary and company(ies) from which foods are purchased:

Food	Company
<u>Fudge &amp; Marshmallow sticks</u>	<u>Dry Creek Neighbors Club</u>

I, \_\_\_\_\_ hereby state that the information I have provided is current, true and correct to the best of my knowledge and meets the California Health & Safety Code requirements. If the food facility operator fails to comply with the conditions of this contract, or if this contract is modified or cancelled, the commissary owner shall notify this office immediately.

Print Name/Title Victor Trentadue Signature \_\_\_\_\_ Date 4/16/20

Section 3 - To be completed by the ENVIRONMENTAL HEALTH jurisdiction outside of Sonoma County

The commissary is located in \_\_\_\_\_ County. The above food facility meets the commissary requirements pursuant to Cal Code Sections 114211, 114245.1, 114294 and 114326. The above checked services are available at the stated commissary. Please notify the Sonoma County Department of Health, Environmental Health & Safety should the status of this permit change or if it falls below acceptable Cal Code standards.

EHS Signature \_\_\_\_\_ Print Name \_\_\_\_\_  
Date \_\_\_\_\_ Business Phone \_\_\_\_\_



Environmental Health ♦ 463 Aviation Blvd, Santa Rosa, CA 95403 ♦ 707-565-6565 ♦ [EH@sonomacounty.gov](mailto:EH@sonomacounty.gov)  
<https://sonomacounty.gov/environmentalhealth>

**Temporary Food Facility (TFF) Permit Application**

Submit complete application 30 calendar days prior to the event. Incomplete applications will not be accepted and will be returned.  
 Applications submitted less than 7 days prior may not allow sufficient processing time to obtain a permit.  
 A penalty fee of up to three times the permit fee may be assessed for operating without a permit at an event.

Applying for:  New Permit  Renewal of Permit - PR #P

TFF Type:  Booth  Truck/Trailer  Cart  Inside a Building Soft Serve:  Yes  No

Business Name HFFCF Owner/Operator Name PHIL MANOUKIAN  
 DBA (Name on Sign at Booth) VEGE HUT / TH DAY AVENTIST OCC Type of Food VEGE SANDWICH II SOUP  
 Mailing Address [REDACTED] City HBG State CA Zip 95448  
 Phone [REDACTED] On-Site Phone SAME  
 Email [REDACTED] Website [REDACTED]

**Section I - Food to Be Sold/Served**

List Food Items to Be Sold/Served	Check if Commercially Pre-Packaged	Check if Pre-Packaged At Commissary	Identify Types of Preparation at Booth Check all that apply. Check N/A if Not Applicable		
FRUIT JUICE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input checked="" type="checkbox"/> (N/A)	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Cooking
BREAD/SANDWICH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Cooking
INCL. TOMATO LETTUCE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Cooking
VEGETABLE SOUP	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): <u>reheating</u>	<input checked="" type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Cooking

At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or below 45°F.  
 At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or above 135°F.

SANDWICH →

If you are changing your menu or preparation level check with our office to determine if you need to resubmit a new TFF permit application. To avoid late fees, please submit changes 30 calendar days prior to the event.

**Section II - Food Preparation and Storage**

All food preparation must be conducted in the approved TFF or at a permitted food facility.

Will food be prepared or stored off-site prior to the event?  Yes  No  
 If yes, Name of Location \_\_\_\_\_  
 If yes, a Commissary Agreement or a copy of your Cottage Food Operation Permit or Registration must be submitted with this application.

**For office use only:**

PE# 3T27 PR# \_\_\_\_\_ Entered by \_\_\_\_\_ Approval by \_\_\_\_\_ Date \_\_\_\_\_  
 5 Consecutive Days or Less Permit is valid from 5-20-26 to 5-23-26  
 Cash  Check  Credit Card Trans# \_\_\_\_\_ Date Rec'd 5-18-26 by EP Amount Rec'd \$ 379



**Section III – List of Community Events**

Please list the community events you propose to operate at in the next 12 months in Sonoma County.

If you decide to add events later, please resubmit this page with the new events listed. Changes must be submitted 30 calendar days prior to the event.

Please attach an additional sheet if you need to list more events, be sure to include the name of the TFF at the top.

Name of Event: HEALDSBURG FUTURE FARMERS COUNTRY FAIR  Event Is Less Than Four Hours Name

of Event Organizer: HEALDSBURG FAIR- BOARD OF DIRECTORS Booth #: 6-19

TFF Person in Charge: PHIL MANOUKIAN

TFF Contact Phone for Day of Event: [REDACTED]

Event Address: 515 PIPER STREET City: HEALDSBURG, CA, 95448

Event Day(s) of the Week: WED- SAT Date(s) of Event: MAY 20-23, 2026

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: [REDACTED]

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

### Section IV - TFF Construction

- TFF is within a permanent building/structure - no need to list materials in this section
- TFF is outdoors/not within a building/structure - please list materials in this section

All TFFs require:

- A washable floor, such as asphalt, concrete or tarp
- Overhead protection, such as canopy or canvas

Moderate and Extensive preparation TFFs must also be constructed with:

- Four (4) sides and pass-through windows

truck / Trailer

Please see Temporary Food Facility Self-Inspection Checklist for a fuller description of requirements.

Floor Material: VINYL Wall Material: PAINTED WOOD  
 Ceiling Material: PAINTED WOOD Size of Pass-Through Window: 2' x 7' (#)

### Section V - Food Protection

Identify methods to protect foods from contamination. Check all that apply.

- Sneeze Guards
- Hinged Chafing Dishes
- N/A
- Only Pre-Packaged Food or Bottled Drinks
- Prepared and Stored Away from the Customers
- Other (Specify): \_\_\_\_\_

### Section VI - Sink Requirements

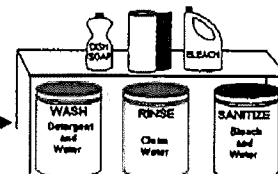
Warewashing sink provided by (check only one):

- Event Organizer
- TFF Operator
- Not Required - special conditions only - see the Self-Inspection Checklist

Type of warewashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink - **required if event is more than 3 consecutive days**
- Self-Contained Portable Sink
- Pre-Packaged Only (exempt from requirement)
- Wash, Rinse and Sanitize - using three compartments/containers, such as 5-gallon buckets - **is only allowed if event is less than 3 consecutive days.**
- Special Conditions Apply - no warewashing required - see the Self-Inspection Checklist

Example →



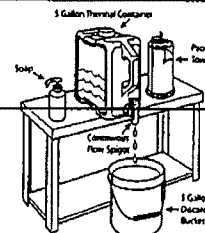
Handwashing sink provided by (check only one):

- Event Organizer
- TFF Operator

Type of handwashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink - **required if event is more than 3 consecutive days**
- Gravity-Fed Unit - **is only allowed if event is less than 3 consecutive days**
- Self-Contained Portable Sink

Example →



### Section VII - Equipment/Utensils Used

Multi-use consumer eating and drinking utensils are prohibited: plates, glassware, etc.

Identify all equipment that will be used in food preparation at the TFF. Check all that apply.

- Barbecue Grill
- Range Burner
- Deep Fryer
- Griddle
- Charbroile
- Mixer
- Blender
- N/A
- Other (Specify): WARMING CLOCK

Will multi-use kitchen utensils be used inside the TFF for food preparation: knives, scoops, spatulas, bowls, etc.?

- Yes
- No

### Section VIII - Hot/Cold Holding Equipment

Identify methods of maintaining food hot or cold during hours of operation. Check all that apply.

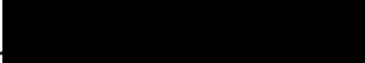
- |                     |  |   |   |
|---------------------|--|---|---|
| <b>Cold Holding</b> | <input checked="" type="checkbox"/> Mechanical Refrigeration | <input type="checkbox"/> Ice Chest              | <input type="checkbox"/> Cold Table                             |
|                     | <input type="checkbox"/> N/A                                 | <input type="checkbox"/> Other (Specify): _____ | <input type="checkbox"/>  |
| <b>Hot Holding</b>  | <input type="checkbox"/> Steam Table                         | <input type="checkbox"/> Chafing Dishes         | <input checked="" type="checkbox"/> Electric Soup Warmer        |
|                     | <input type="checkbox"/> Hot Holding Cabinet                 | <input type="checkbox"/> Hot Dog Roller Grill   | <input checked="" type="checkbox"/> Electric Rice Cooker/Warmer |
|                     | <input type="checkbox"/> N/A                                 | <input type="checkbox"/> Other (Specify): _____ |   |
|                     | <input type="checkbox"/> List Hot Held items: <u>Soup</u>    |   |   |

TFF Permit Fees Effective July 1, 2025

Permit Type* - Please choose the permit you are applying for below		Fee	Reduced Fee Waiver (must meet requirements)
<b>Annual</b>			
<input type="checkbox"/>	Extensive Preparation	\$627.00	
<input type="checkbox"/>	Moderate Preparation	\$463.00	
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$321.00	
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$263.00	<del>\$168.00</del>
<b>5 Consecutive Days or Less</b>			
<input type="checkbox"/>	Extensive Preparation	\$516.00	
<input checked="" type="checkbox"/>	Moderate Preparation	\$379.00	<del>\$340.00</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$282.00	\$253.00
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$223.00	\$125.00
<input type="checkbox"/>	<b>Veteran's Exempt Food Facility</b>	No Fee	

I certify that all information included in this application is true and correct. I certify that I have the authority to sign this application. I am 18 years of age or over and understand that picture ID is required. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that this application must be complete to be considered for submittal.

I understand that the failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of my approval to operate and/or may result in the filing of misdemeanor criminal charges.

Print Name/Title PHIL MANOUKIAN Signature  Date 4/1/2026

Print Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only:**

REHS' Notes



Environmental Health ♦ 463 Aviation Blvd Santa Rosa, CA 95403 ♦ 707-565-6565 ♦ EH@sonoma-county.org  
https://sonomacounty.ca.gov/Health/Environmental-Health-and-Safety/

**COMMISSARY AGREEMENT**  
Mobile Food Facility ♦ Caterer ♦ Temporary Food Facility ♦ Compact Mobile Food Operation

Sections 1 and 2 must be completed. If your commissary is outside of Sonoma County please also complete Section 3.

Section 1 - To be completed by APPLICANT - Please print or type.

Business Name HFFCF PR # \_\_\_\_\_  
Owner/Operator Name PHIL MANOUKIAN Email Address \_\_\_\_\_  
Business Mailing Address \_\_\_\_\_ Ste # \_\_\_\_\_  
City HBG State CA Zip 95448 Home Phone \_\_\_\_\_ Bus. Phone SAME

I, PHIL MANOUKIAN hereby state that the above information is current, true and correct to the best of my knowledge and agree to utilize my approved commissary in accordance with the California Health & Safety Code, California Retail Food Code, and Sonoma County Environmental Health and Safety, requirements. Note: If this Commissary Agreement is modified or cancelled, and a new Commissary Agreement is not provided to this office, your permit to operate a food facility will be subject to suspension or revocation. This Commissary Agreement shall be effective for no longer than one year.

Print Name/Title PHIL MANOUKIAN Signature \_\_\_\_\_ Date 5/8/2026

Section 2 - To be completed by COMMISSARY OWNER/OPERATOR - Please print or type.

Commissary Name Drewish Deli PR # PR0303611  
Address \_\_\_\_\_ Bus. Phone \_\_\_\_\_  
City Henderson Zip 95448 Owner/Operator Drew Ross

Check all appropriate services provided:

- Wastewater disposal
- Potable water
- Disposal of rubbish & garbage
- Hot & cold water for vehicle cleaning
- Other services not listed: \_\_\_\_\_
- Food preparation area
- Electrical hookups
- Toilet & handwashing facilities
- 3-compartment sink
- Refrigeration equipment
- Food storage facilities
- Janitorial sink
- Overnight vehicle storage

EP

List all foods provided by the commissary and company(ies) from which foods are purchased:

Food	Company
VEGETABLE SOUP	
SLICED VEGES FOR SANDWICHES	

I, \_\_\_\_\_ hereby state that the information I have provided is current, true and correct to the best of my knowledge and meets the California Health & Safety Code requirements. If the food facility operator fails to comply with the conditions of this contract, or if this contract is modified or cancelled, the commissary owner shall notify this office immediately.

Print Name/Title Drew Ross Signature \_\_\_\_\_ Date 5/8/26

Section 3 - To be completed by the ENVIRONMENTAL HEALTH jurisdiction outside of Sonoma County

The commissary is located in \_\_\_\_\_ County. The above food facility meets the commissary requirements pursuant to Cal Code Sections 114211, 114245.1, 114294 and 114326. The above checked services are available at the stated commissary. Please notify the Sonoma County Department of Health, Environmental Health & Safety should the status of this permit change or if it falls below acceptable Cal Code standards.

EHS Signature \_\_\_\_\_ Print Name \_\_\_\_\_  
Date \_\_\_\_\_ Business Phone \_\_\_\_\_



Environmental Health ♦ 463 Aviation Blvd, Santa Rosa, CA 95403 ♦ 707-565-6565 ♦ [EH@sonomacounty.gov](mailto:EH@sonomacounty.gov)  
<https://sonomacounty.gov/environmentalhealth>

**Temporary Food Facility (TFF) Permit Application**

Submit complete application 30 calendar days prior to the event. Incomplete applications will not be accepted and will be returned.  
 Applications submitted less than 7 days prior may not allow sufficient processing time to obtain a permit.  
 A penalty fee of up to three times the permit fee may be assessed for operating without a permit at an event.

Applying for:  New Permit  Renewal of Permit - PR #P

TFF Type:  Booth  Truck/Trailer  Cart  Inside a Building Soft Serve:  Yes  No

Business Name HFFCF Owner/Operator Name PHIL MANOLIKIAN  
 DBA (Name on Sign at Booth) ST. JON'S OCC Type of Food TACOS  
 Mailing Address [REDACTED] City HBG State CA Zip 95448  
 Phone [REDACTED] On-Site Phone SAME  
 Email [REDACTED] Website [REDACTED]

Section I - Food to Be Sold/Served					
List Food Items to Be Sold/Served	Check if Commercially Pre-Packaged	Check if Pre-Packaged At Commissary	Identify Types of Preparation at Booth Check all that apply. Check N/A if Not Applicable		
TACOS (meat)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> (N/A)	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input checked="" type="checkbox"/> Cooking
QUESADILLAS	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input checked="" type="checkbox"/> Cooking
Water / Soda	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking

At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or below 45°F.  
 At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or above 135°F.

If you are changing your menu or preparation level check with our office to determine if you need to resubmit a new TFF permit application. To avoid late fees, please submit changes 30 calendar days prior to the event.

**Section II - Food Preparation and Storage**  
 All food preparation must be conducted in the approved TFF or at a permitted food facility.

Will food be prepared or stored off-site prior to the event?  Yes  No

If yes, Name of Location \_\_\_\_\_

If yes, a Commissary Agreement or a copy of your Cottage Food Operation Permit or Registration must be submitted with this application.

**For office use only:**

PE# 3T29 PR# \_\_\_\_\_ Entered by \_\_\_\_\_ Approval by \_\_\_\_\_ Date \_\_\_\_\_  
 5 Consecutive Days or Less Permit is valid from 5.20.26 to 5.23.26  
 Cash  Check  Credit Card Trans# \_\_\_\_\_ Date Rec'd \_\_\_\_\_ by \_\_\_\_\_ Amount Rec'd \$ 516-



✓

Section III - List of Community Events

Please list the community events you propose to operate at in the next 12 months in Sonoma County.  
If you decide to add events later, please resubmit this page with the new events listed. Changes must be submitted 30 calendar days prior to the event.

Please attach an additional sheet if you need to list more events, be sure to include the name of the TFF at the top.

Name of Event: HEALDSBURG FUTURE FARMERS COUNTRY FAIR  Event Is Less Than Four Hours Name

of Event Organizer: HEALDSBURG FAIR- BOARD OF DIRECTORS Booth #: 6-19

TFF Person in Charge: PHIL MANOUKIAN

TFF Contact Phone for Day of Event: [REDACTED]

Event Address: 515 PIPER STREET City: HEALDSBURG CA, 95448

Event Day(s) of the Week: WED-SAT Date(s) of Event: MAY 20-23, 2026

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: ~~Ø~~

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

### Section IV – TFF Construction

- TFF is within a permanent building/structure – no need to list materials in this section  
 TFF is outdoors/not within a building/structure – please list materials in this section

All TFFs require:

- A washable floor, such as asphalt, concrete or tarp
- Overhead protection, such as canopy or canvas

Moderate and Extensive preparation TFFs must also be constructed with:

- Four (4) sides and pass-through windows

Please see Temporary Food Facility Self-Inspection Checklist for a fuller description of requirements.

Floor Material: VINYL Wall Material: E  
 Ceiling Material: TENT VINYL Size of Pass-Through Window: VARIABLE

### Section V – Food Protection

Identify methods to protect foods from contamination. Check all that apply.

- Sneeze Guards  Only Pre-Packaged Food or Bottled Drinks  
 Hinged Chafing Dishes  Prepared and Stored Away from the Customers  
 N/A  Other (Specify): \_\_\_\_\_

### Section VI – Sink Requirements

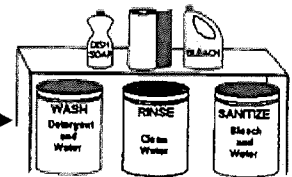
Warewashing sink provided by (check only one):

- Event Organizer  
 TFF Operator  
 Not Required – special conditions only – see the Self-Inspection Checklist

Type of warewashing sink. Check only one. SINK AVAIL

- Permanently Plumbed Sink – required if event is more than 3 consecutive days  
 Self-Contained Portable Sink  
 Pre-Packaged Only (exempt from requirement)  
 Wash, Rinse and Sanitize – using three compartments/containers, such as 5-gallon buckets – is only allowed if event is less than 3 consecutive days.  
 Special Conditions Apply – no warewashing required – see the Self-Inspection Checklist

Example →



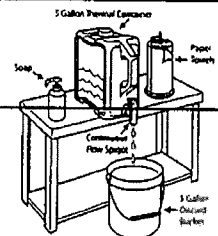
Handwashing sink provided by (check only one):

- Event Organizer  
 TFF Operator

Type of handwashing sink. Check only one. SINK AVAIL

- Permanently Plumbed Sink – required if event is more than 3 consecutive days  
 Gravity-Fed Unit – is only allowed if event is less than 3 consecutive days  
 Self-Contained Portable Sink

Example →



### Section VII – Equipment/Utensils Used

Multi-use consumer eating and drinking utensils are prohibited: plates, glassware, etc.

Identify all equipment that will be used in food preparation at the TFF. Check all that apply.

- Barbecue Grill  Range Burner  Deep Fryer  Griddle  Charbroile  Mixer  Blender  
 N/A  Other (Specify): \_\_\_\_\_

Will multi-use kitchen utensils be used inside the TFF for food preparation: knives, scoops, spatulas, bowls, etc.?

- Yes  No

### Section VIII -- Hot/Cold Holding Equipment

Identify methods of maintaining food hot or cold during hours of operation. Check all that apply.

- Cold Holding**
- Mechanical Refrigeration  Ice Chest  Cold Table  
 N/A  Other (Specify): \_\_\_\_\_
- Hot Holding**
- Steam Table  Chafing Dishes  Electric Soup Warmer  
 Hot Holding Cabinet  Hot Dog Roller Grill  Electric Rice Cooker/Warmer  
 N/A  Other (Specify): \_\_\_\_\_  
 List Hot Held items: Taco meat

TFF Permit Fees Effective July 1, 2025

Permit Type* - Please choose the permit you are applying for below		Fee	Reduced Fee Waiver (must meet requirements)
	<b>Annual</b>		
<input type="checkbox"/>	Extensive Preparation	\$627.00	
<input type="checkbox"/>	Moderate Preparation	\$463.00	<del>1/1</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$321.00	
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$263.00	\$168.00 <del>1/1</del>
	<b>5 Consecutive Days or Less</b>		
<input type="checkbox"/>	Extensive Preparation	\$516.00	
<input type="checkbox"/>	Moderate Preparation	\$379.00	<del>\$340.00</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$282.00	\$253.00
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$223.00	\$125.00
<input type="checkbox"/>	<b>Veteran's Exempt Food Facility</b>	No Fee	

I certify that all information included in this application is true and correct. I certify that I have the authority to sign this application. I am 18 years of age or over and understand that picture ID is required. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that this application must be complete to be considered for submittal.

I understand that the failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of my approval to operate and/or may result in the filing of misdemeanor criminal charges.

Print Name/Title PHIL MANOUKIAN Signature  Date 4/1/2026

Print Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only:**

REHS' Notes



Environmental Health ♦ 463 Aviation Blvd, Santa Rosa, CA 95403 ♦ 707-565-6565 ♦ EH@sonomacounty.gov  
https://sonomacounty.gov/environmentalhealth

**Temporary Food Facility (TFF) Permit Application**

Submit complete application 30 calendar days prior to the event. Incomplete applications will not be accepted and will be returned.  
Applications submitted less than 7 days prior may not allow sufficient processing time to obtain a permit.  
A penalty fee of up to three times the permit fee may be assessed for operating without a permit at an event.

Applying for:  New Permit  Renewal of Permit - PR #P

TFF Type:  Booth  Truck/Trailer  Cart  Inside a Building Soft Serve:  Yes  No

Business Name HFFCF Owner/Operator Name PHIL MANOUKIAN  
DBA (Name on Sign at Booth) GIRL SCOUTS DLU Type of Food STEAK CORN/POSOLE  
Mailing Address [Redacted] City HBA State CA Zip 95448  
Phone [Redacted] On-Site Phone SAME  
Email [Redacted] Website Ø

Section I - Food to Be Sold/Served					
List Food Items to Be Sold/Served	Check if Commercially Pre-Packaged	Check if Pre-Packaged At Commissary	Identify Types of Preparation at Booth <i>Check all that apply. Check N/A if Not Applicable</i>		
ELOTE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> (N/A)	<input checked="" type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input checked="" type="checkbox"/> Cooking
ESQUITE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input checked="" type="checkbox"/> Cooking
PASOLE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input checked="" type="checkbox"/> Cooking
TOSTIESQUITE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): <u>Cooked on site</u>	<input checked="" type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking

At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or below 45°F.  
At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or above 135°F.

If you are changing your menu or preparation level check with our office to determine if you need to resubmit a new TFF permit application. To avoid late fees, please submit changes 30 calendar days prior to the event.

**Section II - Food Preparation and Storage**  
All food preparation must be conducted in the approved TFF or at a permitted food facility.

Will food be prepared or stored off-site prior to the event?  Yes  No

If yes, Name of Location \_\_\_\_\_

If yes, a Commissary Agreement or a copy of your Cottage Food Operation Permit or Registration must be submitted with this application.

**For office use only:**

PE# 3T29 PR# \_\_\_\_\_ Entered by \_\_\_\_\_ Approval by \_\_\_\_\_ Date \_\_\_\_\_

\$ Consecutive Days or Less Permit is valid from \_\_\_\_\_ to \_\_\_\_\_

Cash  Check  Credit Card Trans# \_\_\_\_\_ Date Rec'd \_\_\_\_\_ by \_\_\_\_\_ Amount Rec'd \$ 516-



**Section III - List of Community Events**

Please list the community events you propose to operate at in the next 12 months in Sonoma County.

If you decide to add events later, please resubmit this page with the new events listed. Changes must be submitted 30 calendar days prior to the event.

Please attach an additional sheet if you need to list more events, be sure to include the name of the TFF at the top.

Name of Event: HEALDSBURG FUTURE FARMERS COUNTRY FAIR  Event Is Less Than Four Hours Name

of Event Organizer: HEALDSBURG FAIR- BOARD OF DIRECTORS Booth #: 6-19

TFF Person in Charge: PHIL MANOUKIAN

TFF Contact Phone for Day of Event: [REDACTED]

Event Address: 515 PIPER STREET City: HEALDSBURG, CA, 95448

Event Day(s) of the Week: WED- SAT Date(s) of Event: MAY 20-23, 2026

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: ~~Ø~~

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a **Commissary Agreement** form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a **Commissary Agreement** form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a **Commissary Agreement** form for that caterer.*

**Section IV – TFF Construction**

- TFF is within a permanent building/structure – no need to list materials in this section  
 TFF is outdoors/not within a building/structure – please list materials in this section

All TFFs require:

- A washable floor, such as asphalt, concrete or tarp
- Overhead protection, such as canopy or canvas

Moderate and Extensive preparation TFFs must also be constructed with:

- Four (4) sides and pass-through windows

Please see Temporary Food Facility Self-Inspection Checklist for a fuller description of requirements.

Floor Material: MAT Wall Material: TENT VINYL  
 Ceiling Material: TENT VINYL Size of Pass-Through Window: VARIABLE

**Section V – Food Protection**

*Identify methods to protect foods from contamination. Check all that apply.*

- Sneeze Guards  Only Pre-Packaged Food or Bottled Drinks  
 Hinged Chafing Dishes  Prepared and Stored Away from the Customers  
 N/A  Other (Specify): \_\_\_\_\_

**Section VI – Sink Requirements**

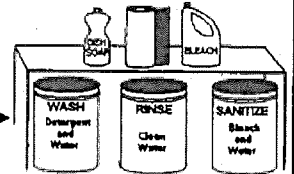
Warewashing sink provided by (check only one):

- Event Organizer  
 TFF Operator  
 Not Required – special conditions only – see the Self-Inspection Checklist

Type of warewashing sink. Check only one. SINKS AVAIL.

- Permanently Plumbed Sink – **required if event is more than 3 consecutive days**  
 Self-Contained Portable Sink  
 Pre-Packaged Only (exempt from requirement)  
 Wash, Rinse and Sanitize – using three compartments/containers, such as 5-gallon buckets – **is only allowed if event is less than 3 consecutive days.**  
 Special Conditions Apply – no warewashing required – see the Self-Inspection Checklist

Example →



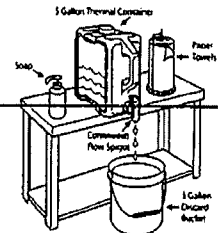
Handwashing sink provided by (check only one):

- Event Organizer  
 TFF Operator

Type of handwashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink – **required if event is more than 3 consecutive days**  
 Gravity-Fed Unit – **is only allowed if event is less than 3 consecutive days**  
 Self-Contained Portable Sink

Example →



**Section VII – Equipment/Utensils Used**

**Multi-use consumer eating and drinking utensils are prohibited: plates, glassware, etc.**

Identify all equipment that will be used in food preparation at the TFF. Check all that apply.

- Barbecue Grill  Range Burner  Deep Fryer  Griddle  Charbroile  Mixer  Blender  
 N/A  Other (Specify): PROPANE

Will multi-use kitchen utensils be used inside the TFF for food preparation: knives, scoops, spatulas, bowls, etc.?

- Yes  No

**Section VIII -- Hot/Cold Holding Equipment**

*Identify methods of maintaining food hot or cold during hours of operation. Check all that apply.*

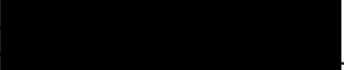
- Cold Holding**
- Mechanical Refrigeration  Ice Chest  Cold Table  
 N/A  Other (Specify): \_\_\_\_\_
- Hot Holding**
- Steam Table  Chafing Dishes  Electric Soup Warmer  
 Hot Holding Cabinet  Hot Dog Roller Grill  Electric Rice Cooker/Warmer  
 Other (Specify): PROPANE
- List Hot Held items: POZZOLE

TFF Permit Fees Effective July 1, 2025

Permit Type* - Please choose the permit you are applying for below		Fee	Reduced Fee Waiver (must meet requirements)
<b>Annual</b>			
<input type="checkbox"/>	Extensive Preparation	\$627.00	
<input type="checkbox"/>	Moderate Preparation	\$463.00	
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$321.00	
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$263.00	<del>\$168.00</del>
<b>5 Consecutive Days or Less</b>			
<input checked="" type="checkbox"/>	Extensive Preparation	<u>\$516.00</u>	
<input type="checkbox"/>	Moderate Preparation	\$379.00	<del>\$340.00</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$282.00	\$253.00
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$223.00	\$125.00
<input type="checkbox"/>	<b>Veteran's Exempt Food Facility</b>	No Fee	

I certify that all information included in this application is true and correct. I certify that I have the authority to sign this application. I am 18 years of age or over and understand that picture ID is required. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that this application must be complete to be considered for submittal.

I understand that the failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of my approval to operate and/or may result in the filing of misdemeanor criminal charges.

Print Name/Title PHIL MANOUKIAN Signature  Date 4/1/2026

Print Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only:**

REHS' Notes



Environmental Health ♦ 463 Aviation Blvd, Santa Rosa, CA 95403 ♦ 707-565-6565 ♦ [EH@sonomacounty.gov](mailto:EH@sonomacounty.gov)  
<https://sonomacounty.gov/environmentalhealth>

**Temporary Food Facility (TFF) Permit Application**

Submit complete application 30 calendar days prior to the event. **Incomplete applications will not be accepted and will be returned.**  
 Applications submitted less than 7 days prior may not allow sufficient processing time to obtain a permit.  
 A penalty fee of up to three times the permit fee may be assessed for operating without a permit at an event.

Applying for  New Permit  Renewal of Permit - PR #P

TFF Type:  Booth  Truck/Trailer  Cart  Inside a Building Soft Serve:  Yes  No

Business Name HFFCF Owner/Operator Name PHIL MANOLUKIAN  
 DBA (Name on Sign at Booth) HEADSBURG BOOSTERS OLLC Type of Food BURRITOS / CORN DOGS  
 Mailing Address [REDACTED] City HSG State CA Zip 95448  
 Phone [REDACTED] On-Site Phone SAME  
 Email [REDACTED] Website [REDACTED]

Section I - Food to Be Sold/Served					
List Food Items to Be Sold/Served	Check if Commercially Pre-Packaged	Check if Pre-Packaged At Commissary	Identify Types of Preparation at Booth Check all that apply. Check N/A if Not Applicable		
BREAKFAST BURRITOS	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> (N/A)	<input checked="" type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify):	<input checked="" type="checkbox"/> Cooking
CORN DOGS	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Portioning <input checked="" type="checkbox"/> Other (Specify): <u>DEEP FRY</u>	<input checked="" type="checkbox"/> Cooking
PIPS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Portioning <input checked="" type="checkbox"/> Other (Specify): <u>SMOKED / BBQ</u>	<input checked="" type="checkbox"/> Cooking <u>-on site</u>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Cooking
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Cooking

At the end of the operating day, destroy all potentially hazardous foods that were required to be held at or below 45°F.  
 At the end of the operating day, destroy all potentially hazardous foods that were required to be held at or above 135°F.

If you are changing your menu or preparation level check with our office to determine if you need to resubmit a new TFF permit application. To avoid late fees, please submit changes 30 calendar days prior to the event.

**Section II - Food Preparation and Storage**  
 All food preparation must be conducted in the approved TFF or at a permitted food facility.

Will food be prepared or stored off-site prior to the event?  Yes  No

If yes, Name of Location \_\_\_\_\_

If yes, a Commissary Agreement or a copy of your Cottage Food Operation Permit or Registration must be submitted with this application.

**For office use only:**

PE# 3129 PR# \_\_\_\_\_ Entered by \_\_\_\_\_ Approval by \_\_\_\_\_ Date \_\_\_\_\_

5 Consecutive Days or Less Permit is valid from 5.20.24 to 5.23.26

Cash  Check  Credit Card Trans# \_\_\_\_\_ Date Rec'd \_\_\_\_\_ by \_\_\_\_\_ Amount Rec'd \$ 516-

**Section III - List of Community Events**

Please list the community events you propose to operate at in the next 12 months in Sonoma County.

If you decide to add events later, please resubmit this page with the new events listed. Changes must be submitted 30 calendar days prior to the event.

Please attach an additional sheet if you need to list more events, be sure to include the name of the TFF at the top.

Name of Event: HEALDSBURG FUTURE FARMERS COUNTRY FAIR  Event Is Less Than Four Hours Name

of Event Organizer: HEALDSBURG FAIR- BOARD OF DIRECTORS Booth #: 6-19

TFF Person in Charge: PHIL MANOUKIAN

TFF Contact Phone for Day of Event: [REDACTED]

Event Address: 515 PIPER STREET City: HEALDSBURG, CA, 95448

Event Day(s) of the Week: WED-SAT Date(s) of Event: MAY 20-23, 2026

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: [REDACTED]

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

**Section IV – TFF Construction**

TFF is within a permanent building/structure – no need to list materials in this section  
 TFF is outdoors/not within a building/structure – please list materials in this section

All TFFs require:

- A washable floor, such as asphalt, concrete or tarp
- Overhead protection, such as canopy or canvas

Moderate and Extensive preparation TFFs must also be constructed with:

- Four (4) sides and pass-through windows

Please see Temporary Food Facility Self-Inspection Checklist for a fuller description of requirements.

Floor Material: VINYL Wall Material: PAINTED/COATED WOOD  
Ceiling Material: PAINTED/COATED WOOD Size of Pass-Through Window: 2'0" (±)

**Section V – Food Protection**

*Identify methods to protect foods from contamination. Check all that apply.*

Sneeze Guards                       Only Pre-Packaged Food or Bottled Drinks  
 Hinged Chafing Dishes             Prepared and Stored Away from the Customers  
 N/A                                         Other (Specify): \_\_\_\_\_

**Section VI – Sink Requirements**

**Warewashing sink provided by (check only one):**  
 Event Organizer  
 TFF Operator  
 Not Required – special conditions only – see the Self-Inspection Checklist

Type of warewashing sink. Check only one. SINK AVAIL.  
 Permanently Plumbed Sink – **required if event is more than 3 consecutive days**  
 Self-Contained Portable Sink  
 Pre-Packaged Only (exempt from requirement)  
 Wash, Rinse and Sanitize – using three compartments/containers, such as 5-gallon buckets – **is only allowed if event is less than 3 consecutive days.**  
 Special Conditions Apply – no warewashing required – see the Self-Inspection Checklist

**Example** →

**Handwashing sink provided by (check only one):**  
 Event Organizer  
 TFF Operator

Type of handwashing sink. Check only one. SINK AVAIL.  
 Permanently Plumbed Sink – **required if event is more than 3 consecutive days**  
 Gravity-Fed Unit – **is only allowed if event is less than 3 consecutive days**  
 Self-Contained Portable Sink

**Example** →

**Section VII – Equipment/Utensils Used**

**Multi-use consumer eating and drinking utensils are prohibited: plates, glassware, etc.**

Identify all equipment that will be used in food preparation at the TFF. Check all that apply.  
 Barbecue Grill     Range Burner     Deep Fryer     Griddle     Charbroile     Mixer     Blender  
 N/A                       Other (Specify): SMOKER

Will multi-use kitchen utensils be used inside the TFF for food preparation: knives, scoops, spatulas, bowls, etc.?  
 Yes     No

**Section VIII -- Hot/Cold Holding Equipment**

*Identify methods of maintaining food hot or cold during hours of operation. Check all that apply.*

**Cold Holding**  
 Mechanical Refrigeration             Ice Chest                                       Cold Table  
 N/A     Other (Specify): \_\_\_\_\_

**Hot Holding**  
 Steam Table                                       Chafing Dishes                                       Electric Soup Warmer  
 Hot Holding Cabinet                               Hot Dog Roller Grill                                       Electric Rice Cooker/Warmer  
 N/A     Other (Specify): \_\_\_\_\_  
 List Hot Held items: PIZZA

**TFF Permit Fees Effective July 1, 2025**

Permit Type* - Please choose the permit you are applying for below		Fee	Reduced Fee Waiver (must meet requirements)
	<b>Annual</b>		
<input type="checkbox"/>	Extensive Preparation	\$627.00	
<input type="checkbox"/>	Moderate Preparation	\$463.00	<i>W</i>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$321.00	
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$263.00	<del>\$168.00</del> <i>B</i>
	<b>5 Consecutive Days or Less</b>		
<input type="checkbox"/>	Extensive Preparation	\$516.00	
<input type="checkbox"/>	Moderate Preparation	\$379.00	<del>\$340.00</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$282.00	\$253.00
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$223.00	\$125.00
<input type="checkbox"/>	<b>Veteran's Exempt Food Facility</b>	No Fee	

I certify that all information included in this application is true and correct. I certify that I have the authority to sign this application. I am 18 years of age or over and understand that picture ID is required. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that this application must be complete to be considered for submittal.

I understand that the failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of my approval to operate and/or may result in the filing of misdemeanor criminal charges.

Print Name/Title PHIL MANOUKIAN Signature  Date 4/1/2026

Print Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only:**

**REHS' Notes**



Environmental Health ♦ 463 Aviation Blvd, Santa Rosa, CA 95403 ♦ 707-565-6565 ♦ [EH@sonomacounty.gov](mailto:EH@sonomacounty.gov)  
<https://sonomacounty.gov/environmentalhealth>

**Temporary Food Facility (TFF) Permit Application**

Submit complete application 30 calendar days prior to the event. **Incomplete applications will not be accepted and will be returned.**  
 Applications submitted less than 7 days prior may not allow sufficient processing time to obtain a permit.  
 A penalty fee of up to three times the permit fee may be assessed for operating without a permit at an event.

Applying for:  New Permit  Renewal of Permit - PR #P

TFF Type:  Booth  Truck/Trailer  Cart  Inside a Building Soft Serve:  Yes  No

Business Name HFFCF Owner/Operator Name PHIL MAWOUKAN  
 DBA (Name on Sign at Booth) CHURCH OF LATTER DAY SAINTS OCL Type of Food BURGER/CHICKEN PLATES  
 Mailing Address [REDACTED] City HBS State CA Zip 95448  
 Phone [REDACTED] On-Site Phone SAME  
 Email [REDACTED] Website [REDACTED]

Section I - Food to Be Sold/Served					
List Food Items to Be Sold/Served	Check if Commercially Pre-Packaged	Check if Pre-Packaged At Commissary	Identify Types of Preparation at Booth <i>Check all that apply. Check N/A if Not Applicable</i>		
CHICKEN	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> (N/A)	<input checked="" type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input checked="" type="checkbox"/> Cooking
BURGER	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input checked="" type="checkbox"/> Cooking
RICE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input checked="" type="checkbox"/> Cooking
SALAD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking
SLUSHIES	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Portioning <input type="checkbox"/> Other (Specify): _____	<input type="checkbox"/> Cooking

At the end of the operating day, destroy all potentially hazardous foods that were required to be held at or below 45°F.  
 At the end of the operating day, destroy all potentially hazardous foods that were required to be held at or above 135°F.

If you are changing your menu or preparation level check with our office to determine if you need to resubmit a new TFF permit application. To avoid late fees, please submit changes 30 calendar days prior to the event.

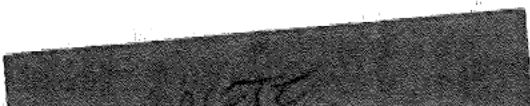
**Section II - Food Preparation and Storage**  
 All food preparation must be conducted in the approved TFF or at a permitted food facility.

Will food be prepared or stored off-site prior to the event?  Yes  No

If yes, Name of Location \_\_\_\_\_

If yes, a Commissary Agreement or a copy of your Cottage Food Operation Permit or Registration must be submitted with this application.

**For office use only:**  
 PE# 3129 PR# \_\_\_\_\_ Entered by \_\_\_\_\_ Approval by \_\_\_\_\_ Date \_\_\_\_\_  
 5 Consecutive Days or Less Permit is valid from 5-20-26 to 5-23-26  
 Cash  Check  Credit Card Trans# \_\_\_\_\_ Date Rec'd \_\_\_\_\_ by \_\_\_\_\_ Amount Rec'd \$ 516-



**Section III – List of Community Events**

Please list the community events you propose to operate at in the next 12 months in Sonoma County.

If you decide to add events later, please resubmit this page with the new events listed. Changes must be submitted 30 calendar days prior to the event.

Please attach an additional sheet if you need to list more events, be sure to include the name of the TFF at the top.

Name of Event: HEALDSBURG FUTURE FARMERS COUNTRY FAIR  Event Is Less Than Four Hours Name

of Event Organizer: HEALDSBURG FAIR- BOARD OF DIRECTORS Booth #: 6-19

TFF Person in Charge: PHIL MANOUKIAN

TFF Contact Phone for Day of Event: [REDACTED]

Event Address: 515 PIPER STREET City: HEALDSBURG, CA, 95448

Event Day(s) of the Week: WED-SAT Date(s) of Event: MAY 20-23, 2026

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: [REDACTED]

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a **Commissary Agreement** form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a **Commissary Agreement** form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a **Commissary Agreement** form for that caterer.*

### Section IV – TFF Construction

- TFF is within a permanent building/structure – no need to list materials in this section  
 TFF is outdoors/not within a building/structure – please list materials in this section

All TFFs require:

- A washable floor, such as asphalt, concrete or tarp
- Overhead protection, such as canopy or canvas

Moderate and Extensive preparation TFFs must also be constructed with:

- Four (4) sides and pass-through windows

Please see Temporary Food Facility Self-Inspection Checklist for a fuller description of requirements.

Floor Material: MAT Wall Material: Canvas  
 Ceiling Material: TENT VINYL Size of Pass-Through Window: VARIABLE

### Section V – Food Protection

Identify methods to protect foods from contamination. Check all that apply.

- Sneeze Guards  
 Hinged Chafing Dishes  
 N/A  
 Only Pre-Packaged Food or Bottled Drinks  
 Prepared and Stored Away from the Customers  
 Other (Specify): \_\_\_\_\_

### Section VI – Sink Requirements

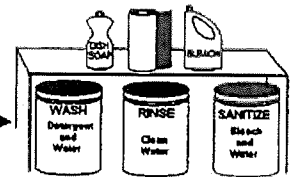
Warewashing sink provided by (check only one):

- Event Organizer  
 TFF Operator  
 Not Required – special conditions only – see the Self-Inspection Checklist

Type of warewashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink – required if event is more than 3 consecutive days  
 Self-Contained Portable Sink  
 Pre-Packaged Only (exempt from requirement)  
 Wash, Rinse and Sanitize – using three compartments/containers, such as 5-gallon buckets – is only allowed if event is less than 3 consecutive days.  
 Special Conditions Apply – no warewashing required – see the Self-Inspection Checklist

Example →



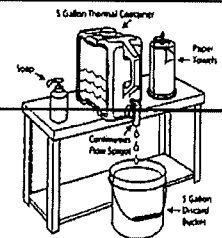
Handwashing sink provided by (check only one):

- Event Organizer  
 TFF Operator

Type of handwashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink – required if event is more than 3 consecutive days  
 Gravity-Fed Unit – is only allowed if event is less than 3 consecutive days  
 Self-Contained Portable Sink

Example →



### Section VII – Equipment/Utensils Used

Multi-use consumer eating and drinking utensils are prohibited: plates, glassware, etc.

Identify all equipment that will be used in food preparation at the TFF. Check all that apply.

- Barbecue Grill  Range Burner  Deep Fryer  Griddle  Charbroile  Mixer  Blender  
 N/A  Other (Specify): RICE COOKER

Will multi-use kitchen utensils be used inside the TFF for food preparation: knives, scoops, spatulas, bowls, etc.?

- Yes  No

### Section VIII -- Hot/Cold Holding Equipment

Identify methods of maintaining food hot or cold during hours of operation. Check all that apply.

- Cold Holding**  
 Mechanical Refrigeration  Ice Chest  Cold Table  
 N/A  Other (Specify): \_\_\_\_\_
- Hot Holding**  
 Steam Table  Chafing Dishes  Electric Soup Warmer  
 Hot Holding Cabinet  Hot Dog Roller Grill  Electric Rice Cooker/Warmer  
 N/A  Other (Specify): \_\_\_\_\_  
 List Hot Held items: Chicken, rice

**TFF Permit Fees Effective July 1, 2025**

Permit Type* - Please choose the permit you are applying for below		Fee	Reduced Fee Waiver (must meet requirements)
	<b>Annual</b>		
<input type="checkbox"/>	Extensive Preparation	\$627.00	
<input type="checkbox"/>	Moderate Preparation	\$463.00	
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$321.00	
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$263.00	<del>\$168.00</del>
	<b>5 Consecutive Days or Less</b>		
<input checked="" type="checkbox"/>	Extensive Preparation	\$516.00	
<input type="checkbox"/>	Moderate Preparation	\$379.00	<del>\$340.00</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$282.00	\$253.00
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$223.00	\$125.00
<input type="checkbox"/>	<b>Veteran's Exempt Food Facility</b>	No Fee	

I certify that all information included in this application is true and correct. I certify that I have the authority to sign this application. I am 18 years of age or over and understand that picture ID is required. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that this application must be complete to be considered for submittal.

I understand that the failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of my approval to operate and/or may result in the filing of misdemeanor criminal charges.

Print Name/Title PHIL MANOUKIAN Signature  Date 4/1/2026

Print Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only:**

REHS' Notes



Environmental Health ♦ 463 Aviation Blvd, Santa Rosa, CA 95403 ♦ 707-565-6565 ♦ [EH@sonomacounty.gov](mailto:EH@sonomacounty.gov)  
<https://sonomacounty.gov/environmentalhealth>

**Temporary Food Facility (TFF) Permit Application**

Submit complete application 30 calendar days prior to the event. Incomplete applications will not be accepted and will be returned.  
 Applications submitted less than 7 days prior may not allow sufficient processing time to obtain a permit.  
 A penalty fee of up to three times the permit fee may be assessed for operating without a permit at an event.

Applying for:  New Permit  Renewal of Permit - PR #P

TFF Type:  Booth  Truck/Trailer  Cart  Inside a Building Soft Serve:  Yes  No

Business Name HFFCF Owner/Operator Name PHIL MANOUKIAN  
 DBA (Name on Sign at Booth) HEALDSBURG KIWANIS OCC Type of Food PIZZA/SODA/WATER  
 Mailing Address \_\_\_\_\_ City HBOG State CA Zip 95440  
 Phone \_\_\_\_\_ On-Site Phone SAME  
 Email \_\_\_\_\_ Website Ø

Section I - Food to Be Sold/Served			
List Food Items to Be Sold/Served	Check if Commercially Pre-Packaged	Check if Pre-Packaged At Commissary	Identify Types of Preparation at Booth Check all that apply. Check N/A if Not Applicable
PIZZA	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Assembly <input checked="" type="checkbox"/> Portioning <input checked="" type="checkbox"/> Cooking <input type="checkbox"/> (N/A) <input type="checkbox"/> Other (Specify): _____
SODA WATER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> Portioning <input type="checkbox"/> Cooking <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Other (Specify): _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> Portioning <input type="checkbox"/> Cooking <input type="checkbox"/> N/A <input type="checkbox"/> Other (Specify): _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> Portioning <input type="checkbox"/> Cooking <input type="checkbox"/> N/A <input type="checkbox"/> Other (Specify): _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Assembly <input type="checkbox"/> Portioning <input type="checkbox"/> Cooking <input type="checkbox"/> N/A <input type="checkbox"/> Other (Specify): _____

At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or below 45°F.  
 At the end of the operating day, **destroy** all potentially hazardous foods that were required to be held at or above 135°F.

If you are changing your menu or preparation level check with our office to determine if you need to resubmit a new TFF permit application. To avoid late fees, please submit changes 30 calendar days prior to the event.

**Section II - Food Preparation and Storage**  
 All food preparation must be conducted in the approved TFF or at a permitted food facility.

Will food be prepared or stored off-site prior to the event?  Yes  No

If yes, Name of Location \_\_\_\_\_

If yes, a Commissary Agreement or a copy of your Cottage Food Operation Permit or Registration must be submitted with this application.

**For office use only:**

PE# 3T29 PR# \_\_\_\_\_ Entered by \_\_\_\_\_ Approval by \_\_\_\_\_ Date \_\_\_\_\_

5 Consecutive Days or Less Permit is valid from 5-20-26 to 5-23-26

Cash  Check  Credit Card Trans# \_\_\_\_\_ Date Rec'd \_\_\_\_\_ by \_\_\_\_\_ Amount Rec'd \$ 514-

- Hot Holding pizza



**Section III - List of Community Events**

Please list the community events you propose to operate at in the next 12 months in Sonoma County.  
If you decide to add events later, please resubmit this page with the new events listed. Changes must be submitted 30 calendar days prior to the event.

Please attach an additional sheet if you need to list more events, be sure to include the name of the TFF at the top.

Name of Event: HEALDSBURG FUTURE FARMERS COUNTRY FAIR  Event Is Less Than Four Hours Name

of Event Organizer: HEALDSBURG FAIR- BOARD OF DIRECTORS Booth #: 6-19

TFF Person in Charge: PHIL MANOUKIAN

TFF Contact Phone for Day of Event: [REDACTED]

Event Address: 515 APER STREET City: HEALDSBURG, CA, 95448

Event Day(s) of the Week: WED-SAT Date(s) of Event: MAY 20-23, 2026

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: Ø

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

Name of Event: \_\_\_\_\_  Event Is Less Than Four Hours Name

of Event Organizer: \_\_\_\_\_ Booth #: \_\_\_\_\_

TFF Person in Charge: \_\_\_\_\_

TFF Contact Phone for Day of Event: \_\_\_\_\_

Event Address: \_\_\_\_\_ City: \_\_\_\_\_

Event Day(s) of the Week: \_\_\_\_\_ Date(s) of Event: \_\_\_\_\_

**If you are hiring a caterer, please complete this section:**

Name of Catering Business: \_\_\_\_\_

Caterer's Sonoma County PR#: \_\_\_\_\_

*\*If caterer is from out of county, please turn in a Commissary Agreement form for that caterer.*

### Section IV – TFF Construction

- TFF is within a permanent building/structure – no need to list materials in this section  
 TFF is outdoors/not within a building/structure – please list materials in this section

All TFFs require:

- A washable floor, such as asphalt, concrete or tarp
- Overhead protection, such as canopy or canvas

Moderate and Extensive preparation TFFs must also be constructed with:

- Four (4) sides and pass-through windows

Please see Temporary Food Facility Self-Inspection Checklist for a fuller description of requirements.

Floor Material: MAT. Wall Material: [scribble]  
 Ceiling Material: TENT VINYL Size of Pass-Through Window: [scribble] VARIABLE

### Section V – Food Protection

Identify methods to protect foods from contamination. Check all that apply.

- Sneeze Guards  Only Pre-Packaged Food or Bottled Drinks  
 Hinged Chafing Dishes  Prepared and Stored Away from the Customers  
 N/A  Other (Specify): \_\_\_\_\_

### Section VI – Sink Requirements

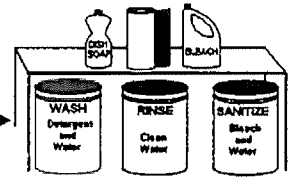
Warewashing sink provided by (check only one):

- Event Organizer  
 TFF Operator  
 Not Required – special conditions only – see the Self-Inspection Checklist

Type of warewashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink – required if event is more than 3 consecutive days  
 Self-Contained Portable Sink  
 Pre-Packaged Only (exempt from requirement)  
 Wash, Rinse and Sanitize – using three compartments/containers, such as 5-gallon buckets – is only allowed if event is less than 3 consecutive days.  
 Special Conditions Apply – no warewashing required – see the Self-Inspection Checklist

Example →



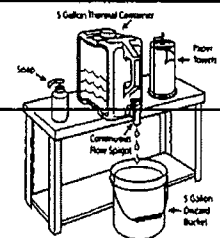
Handwashing sink provided by (check only one):

- Event Organizer  
 TFF Operator

Type of handwashing sink. Check only one. SINK AVAIL.

- Permanently Plumbed Sink – required if event is more than 3 consecutive days  
 Gravity-Fed Unit – is only allowed if event is less than 3 consecutive days  
 Self-Contained Portable Sink

Example →



### Section VII – Equipment/Utensils Used

Multi-use consumer eating and drinking utensils are prohibited: plates, glassware, etc.

Identify all equipment that will be used in food preparation at the TFF. Check all that apply.

- Barbecue Grill  Range Burner  Deep Fryer  Griddle  Charbrole  Mixer  Blender  
 N/A  Other (Specify): PIZZA OVEN

Will multi-use kitchen utensils be used inside the TFF for food preparation: knives, scoops, spatulas, bowls, etc.?

- Yes  No

### Section VIII -- Hot/Cold Holding Equipment

Identify methods of maintaining food hot or cold during hours of operation. Check all that apply.

- Cold Holding**  
 Mechanical Refrigeration  Ice Chest  Cold Table  
 N/A  Other (Specify): \_\_\_\_\_
- Hot Holding**  
 Steam Table  Chafing Dishes  Electric Soup Warmer  
 Hot Holding Cabinet  Hot Dog Roller Grill  Electric Rice Cooker/Warmer  
 N/A  Other (Specify): \_\_\_\_\_

List Hot Held Items:

Pizza

TFF Permit Fees Effective July 1, 2025

Permit Type* - Please choose the permit you are applying for below		Fee	Reduced Fee Waiver (must meet requirements)
	<b>Annual</b>		
<input type="checkbox"/>	Extensive Preparation	\$627.00	
<input type="checkbox"/>	Moderate Preparation	\$463.00	
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$321.00	
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$263.00	<del>\$168.00</del>
	<b>5 Consecutive Days or Less</b>		
<input type="checkbox"/>	Extensive Preparation	\$516.00	
<input type="checkbox"/>	Moderate Preparation	\$379.00	<del>\$340.00</del>
<input type="checkbox"/>	Minimal Preparation (includes sampling)	\$282.00	\$253.00
<input type="checkbox"/>	Prepackaged/No Food Preparation	\$223.00	\$125.00
<input type="checkbox"/>	<b>Veteran's Exempt Food Facility</b>	No Fee	

I certify that all information included in this application is true and correct. I certify that I have the authority to sign this application. I am 18 years of age or over and understand that picture ID is required. I understand that I may be asked to provide additional information in order for the application to be approved and that the information provided is considered part of the application. I understand that this application must be complete to be considered for submittal.

I understand that the failure to meet the conditions identified in this application or failure to comply with requirements set forth in the California Health and Safety Code may result in the disposal of food, suspension of my approval to operate and/or may result in the filing of misdemeanor criminal charges.

Print Name/Title PHIL MANOUKIAN Signature  Date 4/1/2026

Print Name/Title \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only:**

REHS' Notes