

## NOTICE OF INTENT FOR ORGANIZERS OF SPECIAL EVENTS / MARKETS

**Please complete and submit to the Middlesex-London Health Unit at least 30 days before start date of event**

### Special Event / Market Information

\*Name of Event: \_\_\_\_\_ Start Date: \_\_\_\_\_

\*Event Dates & Times: (e.g. Wednesdays 12-3 pm) \_\_\_\_\_

\*Location/Address: \_\_\_\_\_

Venue Type: Public Park  Street Festival  Mall Property  Other: \_\_\_\_\_

Outdoor  Indoor  Is this a repeat event: Yes  No  Diagram of Event Layout included: Yes  No

\*Organizer: \_\_\_\_\_

Name	Phone Number	E-mail
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### Site Information (Yes means provided at the site, No means vendors must supply themselves)

Potable Water Supply available: Yes  No  Electricity available: Yes  No

Handwashing facilities available: Yes  No  Refrigerated trucks available for vendor use: Yes  No

Dishwashing facilities available: Yes  No  Waste Water Disposal: Yes  No

Garbage Disposal: Yes  No

### Vendor Information

Will there be food vendors? Yes  No  Expected Number of Food Vendors: \_\_\_\_\_

Are all food products pre-packaged? Yes  No  Will food samples be provided? Yes  No

If Yes, have each food vendor complete and submit a [Notice of Intent to Operate as a Special Event / Market Vendor form](#)

Will there be any vendors at the event that perform personal services, such as, hair cutting, body piercing, tattooing or manicures/pedicures? Yes  No

If Yes, have each vendor performing personal services complete and submit a [Special Events Personal Services Vendor form](#)

Will any of the vendors be operating a Petting Zoo: (any activity where the public has contact with animals): Yes  No

\*Attach a **list of vendors (food, personal services and petting zoo)** with **booth name, vendor's name, vendor phone number, vendor e-mail address**. Food vendors include anyone selling/providing any food or drink intended for human consumption (including prepackaged items). Note it is the responsibility of the organizer to notify the Health Unit of any changes in vendors that occur.

PLEASE NOTE THE FOLLOWING

1. Section 16(2) of Ontario Health Protection and Promotion Act, R.S.O. 1990, c. H.7 requires that every person who intends to commence to operate a food premise shall give notice of his/her intention to the Medical Officer of Health of the health unit in which the food premise will be located.
2. The personal information on this form is collected under the authority of *The Health Protection and Promotion Act, R.S.O. 1990, c. H.7*. It will be used for ownership identification and enforcement of the Act and the applicable Regulations under the Act. Contact David Pavletic, Food Safety & Healthy Environments Manager at 519-663-5317 ext. 2303 if you have further questions. Copies of the Act and the Regulations are also available at [www.ontario.ca/laws](http://www.ontario.ca/laws).

Comments:

\_\_\_\_\_  
**Name of Vendor / Operator submitting form (Please print name clearly)**

\_\_\_\_\_  
**Date**

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