

# 2024 Solar Eclipse Planning (Temporary Food and Temporary Camp permits)



# Temporary Campground

- (JJ) "Temporary campground" means any tract of land used for a period not to exceed a total of twenty-one days per calendar year for the purpose of parking five or more recreational vehicles, dependent recreational vehicles or portable camping units or any combination thereof, for one or more periods of time that do not exceed **seven consecutive days** or parts thereof.
- (3) No recreational vehicle park, recreation camp, combined park-camp, or temporary park-camp shall be maintained or operated in this state without a license. However, no person who neither intends to receive nor receives anything of value arising from the use of, or the sale of goods or services in connection with the use of, a recreational vehicle park, recreation camp, combined park-camp, or temporary park-camp is required to procure a license under this division.



- Ok, that's the code but what's the sum?
- Already existing campground?

# Camp site basics

SITES	MEN - Urinals	MEN - Toilets	WOMEN - Toilets
5-15		1	1
16 - 30	1	1	2
31 - 60	1	2	3
61 - 90	2	2	4
91 - 120	2	3	5
121 - 150	3	3	6
151 - 200	4	4	8
201 - 300	5	5	10
301 - 400	6	6	12
401 - 500	7	7	14
501 - Up	Add 1 per 200	Add 1 per 200	Add 2 per 200

- Individual sites minimum of 1,000 sq. ft.
  - Either 1 RV and 2 portable camping units, OR
  - 3 portable camping units
  - No less than 15 ft b/t sides adjacent sites. 10 ft b/t the ends adjacent sites. Same site units maintain at least 5 ft b/t all units.
- Toilets are required. Amount below based on number of sites.
- Providing drinking water is optional.

# Fire Department Notes:

- (b) Firefighting equipment of the type and quantity acceptable to the state fire marshal or local fire department shall be available for use in fighting fires.
- (11) The density requirements for temporary campgrounds, where open fires are prohibited by the operator, shall be determined by the licensor. The licensor shall request and consider recommendations from the local fire authority with jurisdiction.
- (1) Firefighting equipment of the type and quantity acceptable to the state fire marshal or local fire department shall be made available by the licensee for use in fighting fires. All firefighting equipment shall be maintained in good operating condition and located so as to be readily available for use at all times.
- Plans:(3) Written verification by the fire protection authority or authorities that have jurisdiction in the area that adequate fire protection can be provided to the campground.
- (C) Each person applying for an initial license to operate a recreational vehicle park, recreation camp, combined park-camp, or temporary park-camp shall provide acceptable proof to the director, or to the licensor in the case of a temporary park-camp, that adequate fire protection will be provided and that applicable fire codes will be adhered to in the construction and operation of the park, camp, or park-camp.



# Permit is needed.. Process overview

1. Contact DPHD for site evaluation( up to 21)→
2. Complete and submit all plan review documents (15 or more)→
3. Approval of plans from DPHD→
4. License inspection on site (7) (collection of state application and fee)



# Contact DPHD for site evaluation

Ohio Department of Health

## SITE EVALUATION REPORT

To be completed by licensor having jurisdiction.

Authority: Ohio Administrative Code Chapter, 3701-26-03

TYPE OF PROJECT		TYPE OF DEVELOPMENT	
<input type="checkbox"/>	Recreation Camp (RC)	<input type="checkbox"/>	New
<input type="checkbox"/>	Recreational Vehicle Park (RVP)	<input type="checkbox"/>	Substantial Alteration
<input type="checkbox"/>	Combined Park Camp (CPC)		
<input type="checkbox"/>	*Temporary Campground (TPC)		

\*TPCs are the responsibility of the local health district.

COUNTY		LOCAL HEALTH DISTRICT	
FACILITY NAME		OWNER	
STREET ADDRESS		STREET ADDRESS	
CITY, ZIP CODE		CITY, STATE, ZIP	
FACILITY PHONE NO.	FACILITY E-MAIL	OWNER PHONE NO.	OWNER E-MAIL

<b>I. Site Information/Conditions:</b> A. Describe access thoroughfares on and adjoining the site: _____ B. Describe adjoining land uses: _____ C. Describe significant topographic features such as unusable land area, sharp changes in grade, waterways, or wetlands: _____ D. You may use the back of this form for additional remarks or to sketch the above or any other appropriate items. E. Soil classification: list predominant soil types and characteristics (refer to the "Soil Conservation Service, Soil Survey": _____ F. Research and comment on previous land uses to include, but not limited to, landfills or hazardous substance/disposal sites: _____																																																																				
<b>II. Lot Information:</b> Number of existing, fully developed lots: _____ (any lot a man, home can be placed/occupied) Total number of proposed lots: _____		<b>III. Describe work proposed:</b> _____ _____																																																																		
<b>IV. Utilities (check appropriate items):</b> <table border="0"> <tr> <td>A. Transmission lines:</td> <td>Existing</td> <td>Proposed</td> <td>No Indication</td> <td></td> </tr> <tr> <td>Electric</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Gas, propane, fuel oil</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Water</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Sanitary Sewer</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Storm sewer</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>B. Service systems:</td> <td></td> <td></td> <td></td> <td>Public Private Other</td> </tr> <tr> <td>Water</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Sanitary</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Campgrounds only:</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Restroom(s)</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Dump station(s)</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Waste water drain(s)</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td></td> </tr> </table> <p>Based on soil types in Sec. I E above, do you oppose use of a leaching type waste water drain(s)? <input type="checkbox"/> Y <input type="checkbox"/> N</p> <p><b>Note:</b> New development or expansion may be subject to OEPA review and permits.</p>				A. Transmission lines:	Existing	Proposed	No Indication		Electric	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Gas, propane, fuel oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Sanitary Sewer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Storm sewer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		B. Service systems:				Public Private Other	Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sanitary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Campgrounds only:					Restroom(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Dump station(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Waste water drain(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<b>V. Expansion/Substantial Alteration/New Development:</b> A. Is the proposed development licensed by the licensor? <input type="checkbox"/> Yes <input type="checkbox"/> No 1. Verify the number of lots on the license permit with section II above, and with previously approved plans, plan approval letters, and plan extension approval letters. B. Comment on the compliance of the existing facilities to the appropriate rules. _____ C. Objections to development of the existing or proposed project. _____																																																																				

SANITARIAN	DATE
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HBIA 5228 (Rev. 4/16)

- Overall, the process starts with DPHD completing a site evaluation. A copy of this report can be found on the ODH website but is only filled out by the DPHD inspector.

This is **REQUIRED** (DPHD Up to 21 days of a request to Complete)

# Complete Plan Review Application

- <https://www.delawarehealth.org/>
- Plans must be submitted **15 days** PRIOR to opening (we are asking for longer for the solar if possible) Keep in mind the **site evaluation..**
- There is a lot that goes into the application. All items must be completed and submitted to start review.



Delaware Public Health District  
2715 S. Lemay Street  
Chesapeake, Ohio 43015  
(614) 388-1700  
Delawarehealth.org

**Temporary Park-Camp  
Plan Review Application**  
Environmental Health Division

**Instructions:**  
1. Plans for temporary park-camps shall be submitted to Delaware Public Health District for review and approval at least fifteen (15) days prior to the opening of the temporary park-camp.  
2. Complete, sign and date the application.  
3. Submit all necessary plans and documentation (see reverse side).

Proposed Park-Camp Information											
Temporary Park-Camp Name		Proposed Dates of Operation Start Date	End Date								
Park-Camp Address		City/State	Zip Code								
Proposed Number of Sites	Type of Camping Units	RV's with hookups	PortaPottos/units								
<b>Park Operator</b> Operator's Name _____ Phone Number _____ Address _____ City _____ State _____ Zip Code _____											
<b>Property Owner</b> Property Owner's Name _____ Phone Number _____ Address _____ City _____ State _____ Zip Code _____											
<b>Signature Required</b> I hereby certify that I am the intended operator or authorized representative of this proposed park-camp. Signature _____ Date _____											
<b>For Office Use Only</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Date Plans Received</td> <td>Plans Approved</td> <td>Approved</td> <td>Denied</td> </tr> <tr> <td>Initiation</td> <td>Date</td> <td></td> <td></td> </tr> </table>				Date Plans Received	Plans Approved	Approved	Denied	Initiation	Date		
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Initiation	Date										

- Each plan submittal shall include the following:**
- Signed and completed Plan Review Application
  - Site Evaluation Form (completed by the Delaware Public Health District)
  - Written verification by the fire protection authority or authorities that have jurisdiction in the area of all the following:
    - That the park or camp has adequate fire protection.
    - The method and layout of fire protection.
    - The applicable fire codes shall be adhered to in the construction and operation of the park or camp.
  - Two (2) sets of plans and/or drawings to include:
    - A vicinity map, including location and legal description of the park or camp.
    - The area, dimensions, and elevations of the tract of land (to scale).
    - The number, location, and size of all sites (to scale).
    - The location and materials of all roadways and walkways.
    - The location of all permanent buildings, sanitary facilities and other proposed structures, if applicable.
    - Details and specifications of the water supply system, if applicable.
    - Details and specifications of the sewage collection and treatment system.
    - Location, number, and details of gray water recycling system.
    - The location and details of the lighting and electrical systems, if applicable.
    - The method of storage and collection of solid waste.
    - Location, number, and type of toilet facilities.
    - Location of shower facilities (when provided).
    - Variance or waiver requests (if needed) need submitted to ODH at least 90 days prior to the event.
    - Detail of water and sewer hookup at individual sites (if applicable).
  - Additional requirements of the local health department:
    - Method of backflow prevention for potable water supply.
    - Details and specifications where open fires will be permitted in the temporary park-camp.
      - If open fires are permitted, recommendations from the local fire authority concerning the use of open fires will be required.
      - Please note that this may restrict the minimum density and site area.

*\*If any portion of the Temporary Park-Camp is developed and is located within a 100 year flood plain the applicant shall obtain a permit from the board of county commissioners or municipal corporation in accordance with the flood plain management resolution of the county or municipal corporation in which the park-camp is located. If applicable, a copy and conditions of the permit shall be submitted with this application.*

Rev. 10/2013

# License Inspection

## Temporary Campground Application for Plan Review and License to Operate

Name of Temporary Campground		Health District		
Address of event		<b>Directions: (please print)</b>  <b>1. Complete one application for each temporary campground event;</b>  <b>2. Sign and Date</b> the application;  <b>3. Include the required items</b> for review per OAC 3701-26-05(C)(10)  <b>4. License will not be issued until plan review is approved.</b>  <b>5. Contact Local Health District to obtain the license fee amount.</b>		
City/Zip				
Start date	End date			# of days for this event (\$7 days)
Name of Owner / Licensee				
Address				
City/ State /Zip				
Phone #		E-mail		
Number of sites proposed		Water Supply <input type="checkbox"/> Public PWS <input type="checkbox"/> Private <input type="checkbox"/> N/A Type of Sewerage System <input type="checkbox"/> Municipal <input type="checkbox"/> Dump Station(s) <input type="checkbox"/> Septage Hauler <input type="checkbox"/> On-site <input type="checkbox"/> N/A <input type="checkbox"/> Other:		
PWS name:		Local Fire District		
Pits permitted on campsites? <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>Person to Contact regarding inspections, maintenance, or emergencies, if different from licensee.</b> Name _____ Phone # _____ E-mail _____				
I hereby certify that I am the licensee, or the authorized representative of the establishment listed above, and agree to abide by the rules that apply for this license. I certify that the information provided is a true and accurate statement of the facts. Signature _____ Date _____				
<b>Check or money order for the license fee, payable to:</b>  (Licensee to complete: either pre-printed, or with a label or stamp)		<b>Return the fee and application to:</b> Health District Street address  City  Zip Phone #		
<b>LOCAL LICENSING AUTHORITY TO COMPLETE BELOW</b>				
Date Plan Review Application Rec'd:	Date Plan Review Approved:	Number of Days Licensed this Year (including this event):		
Plan Review Approved by:	Number of sites approved:	License Fee:		
		\$		
<b>Application approved for license as according to the applicable sections of the Ohio Revised Code</b>				
Processor:	Date payment received:	Date Processed:		
License Audit No.	Health District License No.			

HEA 5336 (2/18)

Ohio Department of Health

Bureau of Environmental Health and Radiation Protection

- After plan approval and within 7 days of the event a licensing inspection will occur.
- State Application and \$125 permit fee will be collected, if approved.
- Permit can not be valid for more than seven days.



# Operator knowledge:

- <https://odh.ohio.gov/know-our-programs/campgrounds/laws-and-rules>
- ODH link to both rules and regulations regarding temporary campgrounds

# Any Questions on Temporary Campgrounds?

Visit DPHD website ([delawarehealth.org](http://delawarehealth.org)) or call 740-368-1700 and ask to speak to someone from the food unit.

# Temporary Food



- (K) "Temporary food service operation" means a food service operation that is operated at an event for **not more than five consecutive days**, except when operated for more than five consecutive days pursuant to division (E)(2) of section 3717.43 of the Revised Code.
  - (2) A licenser may issue a temporary food service operation license to operate for more than five consecutive days if both of the following apply:
    - (a) The operation will be operated at an event organized by a county agricultural society or independent agricultural society organized under Chapter 1711. of the Revised Code;
    - (b) The person who will receive the license is a resident of the county or one of the counties for which the agricultural society was organized.
- "Food service operation" means a place, location, site, or separate area where food intended to be served in individual portions is prepared or **served for a charge or required donation**.

Whats the sum?

# Exemptions for food permits

- If no exemptions apply,  
<https://codes.ohio.gov/ohio-revised-code/chapter-3717>  
Then a temporary  
permit is required.



# More situational circumstances to determine if temporary food permit is required:

- If you sell a cottage food <https://agri.ohio.gov/divisions/food-safety/resources/cottage-food> at a location that is not within the allowable specified location list, you will need to obtain a temporary food permit.
- If you have a food business with a brick and mortar property you will need a temporary food permit if you go off site to sell your product.
- If you have a catering license, you will need a temporary food permit if you plan on going to a site and selling a product with individual sales as this is not considered true catering.
- A temporary license is not required if you have a valid mobile food service license from anywhere in Ohio and are operating exactly how originally approved.
- If you sell a cottage food at any specific allowable locations, a temporary license is not required.
- Products given away for free or unspecified donations do not need a temporary license.
- If your operation does not fit into any category listed above or in the exemptions from Ohio rules, and you plan on selling food products at an event then you will need to inquire about a temporary food permit.
- **Note: Any product that is NOT already in a package prior to the event is not considered cottage foods. To be considered a cottage food the product must be already packaged and labeled.**

**ANY QUESTIONS ON NEEDING A TEMPORARY PERMIT PLEASE CALL THE HEALTH DEPARTMENT**



# Permit is needed... Process Overview

1. Application submitted to DPHD (10 or more days prior to event) WITH the associated fee (\$60 per day the operation will be open)→
2. DPHD will review and contact if any concerns or questions regarding the application→
3. On site inspection will occur the start of the event. License will be provided on site if the facility is approved.

# Temporary Food Application Submission

- The Application found on our website <https://www.delawarehealth.org/food-safety/> includes DPHD and the state application and all must be filled out and submitted. (at least 10 days prior to the event)
- The Ohio food code states that an application for a license should be filed no less than ten days before the operation is opened. Please understand that any submission or issues with application submitted under the 10-day minimum requirement may result in delay or rejection of the application due to volume during this major event.
- Fees again submitted with the plan review \$60 per day of the event.

**Delaware Public Health District**  
Dedicated to your health

**TEMPORARY FOOD SERVICE APPLICATION**

Please complete this application and return to the Delaware Public Health District

Name of Temporary Food Service Operation: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

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

Date(s) of Event: \_\_\_\_\_ Time(s) of Event: \_\_\_\_\_

Name and address of licensed location where food is to be prepared (if other than at the event site): \_\_\_\_\_

COMPLETE listing of every food/beverage to be offered for sale and their sources:

FOOD ITEM	Use additional sheet if necessary	SOURCE

Provide an explanation of how all HOT FOODS will be kept at 135° F or above: \_\_\_\_\_

Provide an explanation of how all COLD FOODS will be kept at 41° F or below: \_\_\_\_\_

Note: Time Temperature controlled for Safety (TCS) (perishable) foods will NOT be allowed to remain in the 41° F -135° F range. A stem type thermometer (0-220° F) is required to measure internal food temperature.

Explain how all foods will be transported to the serving site (including how foods will be protected from contamination and how acceptable food temperatures will be maintained): \_\_\_\_\_

List all equipment and utensils that will be used at the event site for preparation, display, storage, and serving of food items (Examples: Grill, toaster, tongs, spoons, cooler, etc.): \_\_\_\_\_

Explain how all food will be protected from possible contamination by dust, insects, the public (accidental sneezing, coughing) and other possible contaminants. (Example: wrapping baked items individually in saran wrap): \_\_\_\_\_

Describe the method and location of hand washing that workers will use at the event site: \_\_\_\_\_

Explain how all utensils, equipment or food contact surfaces will be washed, rinsed and sanitized during the event: \_\_\_\_\_

Will you have an approved water supply available? \_\_\_\_\_

How will you dispose of waste water? \_\_\_\_\_

Explain how all waste items will be stored and removed from the site: \_\_\_\_\_

List the surface finishes of floors, walls and ceilings at location where food will be prepared/sold: \_\_\_\_\_

Attach a floor sketch of the operation showing where equipment will be placed and the location of the toilet facilities: \_\_\_\_\_

DELAWARE PUBLIC HEALTH DISTRICT | DELAWAREHEALTH.ORG | (302) 361-1000 | **EX-2017** NEW 2002

## Application for a License to Conduct a Temporary: (Event only use)

**Instructions:**

1. Complete the applicable sections. (Mark any corrections if necessary)
2. Sign and date the application.
3. Make a check or money order payable to:
4. Attach check and report application fee.

Event Service Operation  
Event Food Establishment

Before license application can be processed the application must be completed and the indicated fee submitted. Failure to complete this application and send the proper fee will result in not issuing a license. This action is governed by Chapter 5711 of the Ohio Revised Code.

Name of temporary food facility: \_\_\_\_\_

Location of event: \_\_\_\_\_

Address of event: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date: \_\_\_\_\_

Name of business holder: \_\_\_\_\_

Name of business holder: \_\_\_\_\_

Name of business holder: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

City of food facility operation: \_\_\_\_\_

I hereby certify that I am the business holder, or the authorized representative, of the temporary food service operation or temporary food establishment indicated above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**License to complete below**

Event Service Operation: \_\_\_\_\_

Application approved for license as required by Chapter 5711 of the Ohio Revised Code.

By: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

609-111 (Rev. 11/05)  
609-111 (Rev. 11/05)

Ohio Department of Agriculture  
Ohio Department of Health

# DPHD Application Review



- DPHD review of the application will setup the foundations for the inspection & ensure all code requirements are being met. Does the menu/setup/process/equipment/layout make sense?
- Review can take some time and contact will be crucial to ensure this step is completed to ensure smoother on site inspection.

# Licensing inspection

- An inspection will occur the first day of the event.
- If approved, a license will be provided on site.
  - A temporary food service permit will only be issued for a maximum of five consecutive days
- DPHD has provided a temporary food guide on our website.
- The inspector will ensure food safety code requirements are being met.
- PIC (person in charge) is responsible for knowing the rules

# Operator knowledge

- As with campgrounds, it is up to the operator to know the rules associated with a food business.
- <https://www.delawarehealth.org/food-safety/> DPHD has resources on food safety and a presentation available on Food Safety Basics.
- Overall rules and regulations for food within Ohio can be found at <https://odh.ohio.gov/know-our-programs/food-safety-program/welcome>
- **ALL food items that will be sold under a temporary food license must be prepared onsite or at a licensed facility.**





# Last thoughts...

If a festival is going on or being planned and food will be on site.

We **STRONGLY** recommend checking everyone's mobile license. Everyone should have a valid food license. If they don't have a proper license, they will need a temporary food permit.

Any Questions regarding Temporary Food? Visit DPHD website ([delawarehealth.org](http://delawarehealth.org)) or call 740-368-1700 and ask to speak to someone from the food unit.



## Hiring A Food Truck?

Make sure it's legal! (Licensed and permitted)

License must be an original: blue in color and stamped.

Back of the license must have a drawing and menu.

Only items on the menu are allowed to be sold.

License can be from anywhere in the State of Ohio.

Truck should have proper permits & inspections from the local jurisdiction where they are selling/setting up.

Check the expiration date!

		Food Service Operation License	
Audit Number: JTUK-CR2MH8		License No. JTUK-CFUGVQ	
Licensor Toledo-Lucas County Health Department, 635 N Erie Street Room 350, Toledo, OH, 43604			
Name of Facility/License Holder			
Address/City/State/Zip			
Category / Descriptive Mobile Food Service Operation - Mobile			
<small>This license has been issued in accordance with the requirements of Chapter 3717 of the Ohio Revised Code and is subject to revocation or suspension for cause and is not transferable without consent of the licensor.</small>			
<b>This license shall expire on March 1, 2024</b>			
<small>If this is a mobile food service operation, the license is not valid unless pertinent information appears on the reverse side</small>			
18-Apr-2023 Date		 Health Commissioner	
<small>HEA 5305 (Rev. 04/13)</small>		<small>This license must be displayed in a conspicuous place at the location</small>	
		<small>Ohio Department of Health</small>	

Photo above provided by Toledo-Lucas Health Department