KENT COUNTY HEALTH DEPARTMENT Environmental Health Division



Adam London, RS, MPA Administrative Health Officer

July 22, 2019

Re: Procedures for STFU's

Dear STFU Owner/Operator:

This letter is to clarify the Kent County Health Department's procedure to effectively process and track STFU "Notice of Intents to Serve" and requested unit evaluations.

A special transitory food unit (**STFU**) is a temporary food establishment licensed to operate throughout the state without the 14-day limits or a mobile food establishment that is not required to return to a commissary. The STFU license allows the operator to travel to any fair, festival or event throughout the state under one license. The operator must also obtain at least two fee evaluations during the year from MDARD or a local agency.

Food Law requires that all STFU facilities are required to submit an "notice of intent to operate" at least four days prior to the operation date (not including event date). *Example: Event is on Saturday – intent must be received by Tuesday.*

All STFU facilities requesting evaluations must submit an <u>intent and payment</u> at least <u>four calendar</u> <u>days prior</u> to the operation date (not including event date). Evaluations of STFUs will not be completed without prior payment. *Example: Request for evaluation for Monday – intent and payment must be received by Thursday.*

Payments can be sent via U.S. Postal service, made in person, or by phone Monday through Friday, between 8:00 AM & 5:00 PM.

In the event your plans change after application has been submitted, please contact our office to make other arrangements.

Sincerely,

Rachel Stiening, REHS Supervising Sanitarian Kent County Health Department 700 Fuller Avenue NE Grand Rapids, Michigan 49503 Phone: 616/632-7315 Fax: 616/632-6892 rachel.stiening@kentcountymi.gov



KENT COUNTY HEALTH DEPARTMENT

Environmental Health Division

Adam London, RS, MPA Administrative Health Officer

Notification of Intent to Operate a Special Transitory Food Unit (STFU)

Must be received four (4) days prior to event (not including event date).

EVENT INFORMATION

Name of Event:			
Operation: Start Date:	End Date:		
Hours of Operation:			
Location of Operation (B	e Specific):		
Operation Site:			
	City		ounty:
Phone # of operator duri	ng event:		
OWNER INFORMATION			
Name of STFU Unit:		License Number:	
Name of Operator:		Cell Number:	
Business Address:		OK To Text?	Yes No
Email Address:			
	n Department (LHD) where STFU is li I, list the county where licensed	censed:	
Are you requesting an op	perational evaluation? Yes N	b P	ayment Is Included

PLEASE NOTE: When requesting evaluation "Notification of Intent to Operate" and payment must be received four (4) calendar days prior to event (not including event date). *Example: Request for evaluation for Monday – intent and payment must be received by Thursday.*

Inspections must be done while the **STFU is operating.** Inspections requested outside of the operating season will not be completed. When possible, schedule at least one inspection with the LHD that processes your license.

Michigan's Food Law (Act 92 of 2000, as amended) states that an STFU license holder shall:

- While in operation, request and receive 2 evaluations per licensing year spaced over the span of the operating season.
- A LHD and the MDARD shall charge a fee of \$90.00 for such an evaluation.

- Send a copy of all evaluation reports to the LHD that processes your license within 30 days after receipt.
- Before serving food within the jurisdiction of a LHD, notify the LHD in writing of each location in the jurisdiction at which food will be served and the dates and hours of service. The license holder shall mail the notice by first-class mail, fax, email, or hand-deliver the notice not less than 4 calendar days (not including event date) before any food is served or prepared for serving within the jurisdiction of the LHD. Contact information for LHD's is on the back of this form.

	For Office Use Only:	
Date Notice of Intent Received:	Date Paid:	Amount Paid:
Receipt No:	Nexus No:	Clerk Initials:

Michigan Local Health Departments & MDARD Office
Allegan County Health Department
3255 122 nd Ave
Suite 200
Allegan, Michigan 49010
Ph: (269) 673-5411 FAX: (269) 673-4172
Barry-Eaton District Health Department
1033 Health Care Drive
Charlotte, Michigan 48813 Barry: Ph: (269) 945-9516 FAX: (269) 818-0237
Eaton: Ph: (517) 543-2430 FAX: (517) 541-2686
Bay County Health Department
1200 Washington Avenue
Bay City, Michigan 48708
Ph: (989) 895-4006 FAX: (989) 895-4014
Benzie-Leelanau District Health Department
6051 Frankfort Highway, Ste. 100
Benzonia, MI 49616
Benzie: Ph: (231) 882-4409 FAX: (231) 882-2204 Leelanau: (231) 256-0200 FAX: (231) 256-0225
Berrien County Health Department
2106 South M-139
Benton Harbor, Michigan 49022
Ph: (269) 927-5623 FAX: (269) 927-2960
Branch-Hillsdale-St. Joseph
Community Health Agency
Human Services Building
570 Marshall Road
Coldwater, Michigan 49036 Ph: (517) 279-9561 X 106 FAX: (517) 278-2923
Hillsdale: FAX: (517) 437-0166
St. Joseph: FAX: (269) 273-2452
Calhoun County Health Department
190 E. Michigan Avenue
Battle Creek, Michigan 49017
Ph: (269) 969-6341 FAX: (269) 969-6490
Central Michigan District Health
Department 2012 E. Preston Avenue
Mt. Pleasant, Michigan 48858
Ph: (989) 772-8147 FAX: (989) 773-4319 Counties: Arenac, Clare, Gladwin,
Isabella, Osceola, Roscommon
Chippewa County Health Department
508 Ashmun Street, Suite 120
Sault Ste. Marie, Michigan 49783
Sault Ste. Marie, Michigan 49783 Ph: (906) 635-3620 FAX: (906) 253-3140 Detroit Department of Health
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