

1 Outdoor caterers questionnaire

Please complete all parts of this questionnaire. Failure to return the completed questionnaire could result in disqualification from trading at this event and future events in Lambeth. The completed form should be returned to this Authority at least **4 weeks (28 days) before the date of the event**. The address to which the completed questionnaire should be sent is shown overleaf. If you require assistance in completing this questionnaire please telephone Consumer Protection on **0207 926 6110**.

Name of event:	
Location:	
Name of Food Business Operator:	
Name of business:	
Address:	
Telephone:	e-mail:
Type of unit: (please tick) Mobile Vehicle <input type="checkbox"/> Trailer <input type="checkbox"/> Stall <input type="checkbox"/> Other <input type="checkbox"/>	
If other please specify:	
Number of units attending event:	
If the unit/s attending the event are vehicle/s please give registration number/s:	
Are you registered as a food business with a Local Authority? (please tick) Y <input type="checkbox"/> N <input type="checkbox"/>	
If "Yes" give date of registration:	
Date of last inspection by LA:	
Name of Local Authority:	
Address:	
Telephone:	
Contact Officer (if known)	
Please indicate which of the following facilities you intend to provide on site:	
Wash-hand basin... Hand-drying facilities..... Oven*.....Refrigerators.....	
First-aid kit..... Fryers*.....Cooking hobs*..... Freezers	
Grill/BBQ*.....Bactericide Soap..... Microwaves.....	
Other please specify	
* Please note that if you have any of these appliances you should have a powder or CO2 fire extinguisher and a fire blanket.	
Please turn over ➡	

<p>Is any of the food you intend to sell either cooked or prepared before arrival at the event? Please tick Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>Is this food cooked or prepared at premises other than that of the trader Please tick Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>What foods are prepared on these premises?</p>
<p>What arrangements will you make to ensure the food is transported safely to the event?</p>
<p>What power source does the unit use for cooking/refrigeration, etc Please tick? LPG <input type="checkbox"/> Generator <input type="checkbox"/> None <input type="checkbox"/> Other please specify</p>
<p>What type of fire-fighting equipment do you have? Please tick</p> <p>a) Fire-extinguishers: Co2 (Black) <input type="checkbox"/> Dry Powder (Blue) <input type="checkbox"/> None <input type="checkbox"/></p> <p>b) Fire blanket: yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Have you got a documented Food Safety Management System (Hazard Analysis)</p> <p>Please tick Y <input type="checkbox"/> N <input type="checkbox"/></p> <p>If Yes- What evidence exists to show this?</p> <p>Documented procedures <input type="checkbox"/> HACCP Plan...<input type="checkbox"/>.Flow Chart. <input type="checkbox"/> SFBB.<input type="checkbox"/>. Other please specify.....</p> <p><i>[Please provide a copy of the <u>Menu</u> you will be serving on the day!]</i></p>
<p>Have food handlers at the event received adequate food hygiene training? Please tick Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Will evidence of food handlers training i.e certificates, be available at the event? Please tick Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>What date and time are you planning to arrive on site?</p>
<p>Name of person completing the questionnaire:</p>
<p>Address</p>
<p>Telephone number:</p>
<p>Signature:</p>
<p>Position in Company:</p>

PLEASE RETURN THIS FORM AND SUPPORTING INFORMATION TO:
 Consumer Protection and Sustainability
 Housing, Regeneration and Environment
 London Borough of Lambeth, Blue Star House, 234-244 Stockwell Road, London SW9 9SP