

**BRING THE
HEAT!**



**MORRISTOWN
PROMOTIONS PRESENTS**

The Great Chili Cook Off

Sun. Feb 25, noon - 3 p.m.

HOT PARTY FOR ALL

- Feast of Flavors Basket Gift Certificate
Basket worth over \$500!!
- Multiple Basket Raffle
- Great Chili!

**CHILI FROM THE AREA'S
BEST HOME COOKS! Compete for:**

- Best Overall Chili
- Most Unique Style
- Best Table & Cook's Theme

Awesome Prizes!



**Get a
Chili Cook-Off
T-Shirt! \$20 - all sizes!**



Thank You Sponsors!

**Echos on the Lake
Sid's Place
Turner Inn
Deb Monteith**

**Langbrook
Iron Horse Grill
Barn Quilt Chix
Iron Horse
Ellas on the Bay**

**Paula's Performance
Mack's Restaurant
Stone EZ
Bella-Brooke Vinyard**



MORRISTOWN PROMOTIONS PRESENTS

The Great Chili Cook Off

Bring the Heat!

Chili Cook Off Entry Form

We are bringing back the Chili Cookoff from River Shiver and hope to grow this event into a major Morristown tradition! Showcase your chili-cooking talents and creative theme ideas and help make this a great community event!

How it works for cooks: You will cover the costs of preparing your chili and, due to health department regulations, you must prepare it in the Firehall's Commercial Kitchen. You will serve it in your crockpot but we'll furnish electricity, serving bowls, spoons, napkins, and paper towels.

The Day of the Cook-Off: We'll be waiting for you at the Firehall where you'll prepare your chili. At noon we'll open the doors to the community. You'll serve **2-3 oz. samples** of your chili and family, friends, and neighbors will vote with tickets for their favorites. Plan to **serve 100 people**. At 2 p.m. we'll total the tickets and announce the winners. Winners receive gift certificates to local restaurants valued at \$50. Our overall winner will receive a cash prize and a certificate to display proudly!

It's easy to enter: Just fill out the form. No entry fee! We'll call you to find out how much time you need to prepare your chili and go over the details. You'll make a call to the Health Department where your contact is waiting for you to walk you through the regulations which are provided in this packet. Don't worry. The regulations are pretty common sense and they promise to be nice! *Every cook needs his or her own permit!*

FIRST NAME

LAST NAME

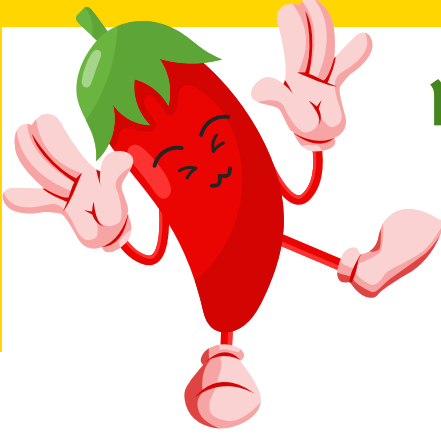
PHONE

EMAIL

CATEGORY

Contact:

riverlightsmorristownny.com



MORRISTOWN PROMOTIONS PRESENTS

The Great Chili Cook Off

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COOK'S CHECK LIST

1. Contact NYS DOH Canton District Office at **315-386-1040** to obtain your temporary Food Service permit. You must do this.
2. Plan to prepare your food on-site, at the event.
3. Your ingredients must be purchased at a commercial store; you may not use deer, bear, fish, etc or home-canned goods.
4. Do not prepare or serve food if you are ill or have open sores or infected cuts.
5. Cook all food to required temperatures.
6. Use an accurate metal probe thermometer to check your temperature.
7. Wash your hands routinely. (Morristown Promotions will provide water, soap, towels, etc.)
8. Use gloves.
9. Avoid contact with ready to eat foods unless you are wearing gloves.
10. Protect the food during food service.
11. The serving utensils must be stored in contact with the food product. The handle of the utensil must not be in contact with the food.
12. Keep hot foods at 140 degrees or more at all times.
13. Keep cold foods at 45 degrees or less at all times.
14. Wear a clean apron.
15. Keep hair restrained in a hat or hair net.

Contact:
riverlightsmorristownny.com

Sanitation Plan Assessment for Temporary Food Service

Please complete a copy of this form for each location and submit with the completed application.

Legal Operator/Operation Name: _____

Event / Location: Morristown Fire Hall **Date(s) of Event** February 25, 2024

Is there an event coordinator? Yes No If yes, please provide contact information if known:

Morristown Gateway Museum/Morristown Promotions

1) **Water Supply Source:** (check all that apply) **Food grade hoses** are required for all water lines.

Municipal water supply Town of Morristown
(Village, City, Town, etc.)

NYS regulated facility _____
(Name of restaurant or other facility)

NYS certified bottled water

Commercially bagged ice or ice from a regulated facility _____
(Name of restaurant or other facility)

2) **Menu –**

- It is recommended that only food items involving a **small number of preparation steps** be served.
- All food must be prepared on-site or at a restaurant or other regulated facility. Home prepared food is not permitted.

List all Food items. Include beverages (attach separate sheets if necessary)	Where will the food item be prepared?
	Morristown Fire Hall

▪ What day/time will **food preparation begin?** Day 2/25/24 Time 9:00 am am/pm

▪ What day/time will food be **served?** Start of service: Day 2/25/24 Time 12:00 pm am/pm
End of service: Day 2/25/24 Time 3:00 pm am/pm

3) **What equipment will be used to cook food?** _____

4) What **equipment** will be used to **hold food**?

- Hot Holding ($\geq 140^{\circ}$ F)
- Cold Holding ($\leq 45^{\circ}$ F) _____

*Note that **thermometers** for checking food cooking and holding temperatures are required

5) **Handwashing Facility:** What type of handwashing facility will you use?

- Plumbed sink and drain line Water container and bucket
 Commercial portable hand wash sink

6) How will you **prevent bare hand contact** with ready to eat foods?

- Single use gloves
 Utensils
 Deli paper/napkins

7) **Sanitizer and Test Strips:** Do you have an EPA registered sanitizer (such as bleach or quaternary ammonia) for cleaning food contact surfaces, dishes and utensils?

Do you have sanitizer test strips for ensuring proper concentration levels? Yes.

8) **Wastewater Disposal:** How will you dispose of wastewater? *Wastewater cannot be disposed on the ground or in storm drains.

- Direct connection to sewer or septic system Portable waste tank or other container

Where will you empty the portable wastewater tank? _____

9) **Site Plan:** Do your outdoor food preparation and service areas have overhead protection? Where mud is a concern, do you have floor coverings?

Reminders:

- All staff and volunteers handling food must be **free of illness, which includes symptoms of nausea, diarrhea, vomiting, flu-like symptoms, and open cuts or sores on their hands or arms.**
- As the Operator of the Temporary Food Service **YOU** are responsible to ensure that all staff and volunteers are aware of requirements for food preparation and service.
- It is advisable that you review Subpart 14-2 of the New York State Sanitary Code for a complete list of rules and regulations. This can be found at your local health department office, or online at:

https://www.health.ny.gov/regulations/nycrr/title_10/part_14/subpart_14-2.htm

Office Use Only: Risk Category: H___M___L___

Application for Permit(s) to Operate Temporary Food Service

State of New York Department of Health

Section A: Owner/Operator Information

Permit Application Information

Operating Corporation N/A

Person in Charge _____
First M.I. Last

Legal Address _____

City, State, Zip _____

Other Name(s) to print on Permit: _____

E-mail address _____

Total Fee: _____

– SSN or EIN Number _____

SSN EIN Number _____
(Circle One)

Phone _____

Home Cell Other (Circle One)

Section B: Please list all Events for which Permits are needed.

Event/Location Address	Operation Name	Dates/Hours of Operation
Morristown Fire Hall, 200 Morris Street, Morristown NY 13664		February 25, 2024, 12pm to 3pm

Section C: FOODS (Please attach additional foods served info for each event listed, if different)

Name of Food	Supplier of Ingredients	Where and How food will be prepared and served, How kept Hot/Cold

Will all food preparation be at the concession? Yes No

If not, please describe:

FOR OFFICE USE ONLY

Application for Permit(s) to Operate Temporary Food Service

State of New York Department of Health

Section D: Workers' Compensation and Disability Insurance

Submit copies of the following documentation with the application to document compliance with the Worker's Compensation Law:

A. Workers Compensation and Disability Insurance Coverage is PROVIDED

Workers Compensation

- Form C-105.2 – Certificate of Worker's Compensation Insurance **OR**
- Form U-26.3 – Certificate of Workers' Compensation Insurance **OR**
- Form SI-12 – Certificate of Workers' Compensation Self-Insurance **OR**
- GSI – 105.2 – Certificate of Participation in Workers' Compensation Group Self-Insurance

AND

Disability Benefits

- DB-120.1 - Certificate of Disability Benefits **OR**
- Form DB-155 – Certificate of Disability Benefits Self-Insurance

✓ **B. Workers Compensation and Disability Insurance Coverage is NOT PROVIDED**

- Form CE-200 – Certificate of Attestation of Exemption from NYS Workers' Compensation and/or Disability Benefits Coverage
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Please return completed application to: Morristown Public Library.

Section E: Signature of Individual Operator or Authorized Official (Entire section must be completed by all applicants.)

Failure to completely fill out and sign this form may delay issuance of your permit to operate. Operation without a valid permit is a violation of the State Sanitary Code. False statements made on this application are punishable under the penal law.

Signature _____

Print Name _____ Title _____ Date _____

FOR OFFICE USE ONLY

Permit issuance recommended? Yes No Number of Permits Issued _____

Conditions of approval _____

Signature _____ Title _____ Date _____