



## Organizer Application Form for Personal Services Special Events

Complete and return to Algoma Public Health at least **30 days** before the start date of this event.

If you need help completing this form, call Algoma Public Health *Environmental Health* at **705-759-5286**.

<b>Event Information</b>			
Event Name:			
Event Date(s):		Expected Number of Attendees:	
Event Location/Address:			
Hours of Operation:		Will Food be Provided: <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, complete Food Vendor list on page 2)	
<b>Organizer Information</b>			
Organizer's Name:			
Corporation/Numbered Company:			
Address:		Business Phone:	
City/Town:	Postal Code:	Cell Phone:	
Email Address:		Fax:	
<b>Responsibilities of Organizer</b>			
<b>Sanitary Facilities (if yes, specify number)</b>			
Portable Toilets <input type="checkbox"/> Yes <input type="checkbox"/> No		Portable Handwash Basins <input type="checkbox"/> Yes <input type="checkbox"/> No	
Permanent Toilets <input type="checkbox"/> Yes <input type="checkbox"/> No		Permanent Handwash Basins <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Water Supply</b>			
Potable water supplied to vendors: <input type="checkbox"/> Yes (if yes, complete next question on the source of the water) <input type="checkbox"/> No			
<b>Water Source:</b> <input type="checkbox"/> Municipal <input type="checkbox"/> Well <input type="checkbox"/> Other (specify)			
<input type="checkbox"/> Water Truck – company name:			
Water lines: Food-grade material <input type="checkbox"/> Yes <input type="checkbox"/> No		Backflow devices provided: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Hydro</b>			
Electricity available: <input type="checkbox"/> Yes <input type="checkbox"/> No		Back-up power available <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Garbage</b>			
Garbage bins available: <input type="checkbox"/> Yes <input type="checkbox"/> No		Garbage disposed of daily: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Services</b>			
<b>Types of personal services that will be offered: (tattooing, piercing, micro-blading, hair dressing etc.)</b>			
Will food be served at this event: <input type="checkbox"/> Yes <input type="checkbox"/> No			



