

SPECIAL EVENTS NOTIFICATION FORM

VENDOR APPLICATION

O. Reg. 493/17: FOOD PREMISES under Health Protection and Promotion Act, R.S.O. 1990, c. H7. A person who gives notice of an intention to commence to operate a food premise to the medical officer of health under subsection 16 (2) of the Act shall include his or her name, contact information and the location of the food premise in the notice.

APPLICATION TO BE SUBMITTED TO ORGANIZER SO THAT DOCUMENTATION IS PROVIDED TO THE HEALTH UNIT

A MINIMUM OF 14 DAYS PRIOR TO THE PROPOSED EVENT.

THIS NOTIFICATION FORM IS TO NOTIFY THE HALIBURTON, KAWARTHA, PINE RIDGE DISTRICT HEALTH UNIT OF:	
☒ Special Event	☐ Farmers Market
☐ Other (please specify):	

SPECIAL EVENT/ FARMERS MARKET INFORMATION:			
Event Name:	Brighton Applefest		
Event Date(s):	Saturday, September 26, 2026		
Hours of Operation:	10:00am to 4:00pm (setup begins at 6:00am for vendors, cleanup is completed by 6:00pm)		
Event Location: (Full address, including street number and name, town/city and postal code.)	Street Fair, Main Street from Prince Edward Street to Victoria Avenue Car Show at Brighton Public School, 24 Elizabeth Street Children's Village at King Edward Park, 75 Elizabeth Street		
Anticipated Attendance:	20,000+		
Event/ Market Layout:	☐ Attached	Will be provided by organizer. ☐ Not attached	
Water supply:	☐ Private (i.e.. Well, Cistern, etc.)	☐ Treated ☐ Untreated	☒ Municipal
Sewage:	☐ Private		☒ Municipal
Garbage Disposal:	☒ Municipal		Removal Frequency: as required
Public Washrooms Available:	☒ Yes ☐ No Please specify type of washroom: <u>portapotties and public restrooms</u> # of Washrooms: <u>40+</u> # of Handwashing Facilities & Location(s): <u>6 located across the event</u>		
Animal Exhibits: (Petting zoo, pony rides, poultry etc.)	☒ Yes ☐ No If yes, please specify type of exhibit: <u>Petting Zoo</u> Rabies Vaccination Certificate(s) Attached: ☐ Yes ☒ No Will be provided by orgnaizer.		

APPLICANT INFORMATION: Please complete this form and send it back to Applefest Organizers at applefest@brighton.ca .			
Name:			
Business Name:			
Address:			
Phone Number:		Email:	
Business Location:	☐ HKPR Region ☐ Outside HKPR *If located outside of HKPR region, most recent inspection report to be attached		

FOOD ITEMS SERVED:	
Type of Food:	Supplied/ Purchased From:

OPERATION INFORMATION:			
Booth Location: ☐ Indoor ☐ Outdoor			
Potable Water Supply	☐ Yes ☐ No ☐ N/A	Certified Food Handler On-Site	☐ Yes ☐ No ☐ N/A
Handwashing Facilities	☐ Yes ☐ No ☐ N/A	Cold Holding Equipment <i>Please specify:</i> _____	☐ Yes ☐ No ☐ N/A
Sanitizing Agent (bleach, QUAT, etc.)	☐ Yes ☐ No ☐ N/A	Hot Holding Equipment <i>Please specify:</i> _____	☐ Yes ☐ No ☐ N/A
Sanitizer Test Strips	☐ Yes ☐ No ☐ N/A	Cooking Equipment <i>Please specify:</i> _____	☐ Yes ☐ No ☐ N/A
Dishwashing	☐ Yes ☐ No ☐ N/A	Thermometers (probe and/ or indictor)	☐ Yes ☐ No ☐ N/A
Booth Ceiling	☐ Yes ☐ No ☐ N/A	Single Use Items	☐ Yes ☐ No ☐ N/A

Please contact the health unit to discuss the legal requirements, review plans and/or conduct a pre-operational assessment prior to the proposed event.

Date of Notification: _____

Signature of Vendor: _____

Any personal and personal health information that you may provide on this form is collected under the authority of relevant legislation including: the Health Protection and Promotion Act, as amended, the Regulated Health Professions Act, the Immunization of School Pupils Act, and the Personal Health Information Protection Act. This information will be used for assessment, management, treatment, and reporting purposes. Your information may be shared within the Health Unit as required by legislation. For information about the collection, use and disclosure of your information, please refer to the Health Unit website at www.hkpr.on.ca or contact the Medical Officer of Health, 200 Rose Glen Road, Port Hope, Ontario, L1A 3V6 or 1-866-888-4577.

Legislation that may apply to your premise may include:

[Health Protection and Promotion Act, R.S.O. 1990, c. H.7 \(ontario.ca\)](#)

[O. Reg. 493/17: FOOD PREMISES \(ontario.ca\)](#)

[O. Reg. 319/08: SMALL DRINKING WATER SYSTEMS \(ontario.ca\)](#)

[Smoke-Free Ontario Act, 2017, S.O. 2017, c. 26, Sched. 3](#)

[Alcohol and Gaming Commission of Ontario | \(agco.ca\)](#)

Local Municipality for Building/structural items and by-laws (garbage areas, zoning, business license, etc)

Useful Resources:

[Food Premises Reference Document, 2019 \(gov.on.ca\)](#)

[Operational Approaches for Food Safety Guideline, 2019 \(gov.on.ca\)](#)

[Food Safety Matters – Farmers' Markets Ontario \(farmersmarketsontario.com\)](#)