



Application Date: _____

Section 1 - Operator Information			
Name of owner/operator:			
Phone:	Cell:		
Mailing address:	City:	State:	Zip:
Email:			
Name of on-site person-in-charge: Staci		Phone: 575-642-8338	
(Provide copy of food handler card or certified manager certificate)			

Section 2 - Temporary Food Event Information			
Name of booth:	Address/Location: Las Cruces Convention Center 680 E University Ave		
Name of event: Men Who	City: Las	State: NM	Zip: 8800
Date(s) of event		Time(s) of event	
Start date: 8/15/2026	End date: 8/15/2026	Set-up time: 2pm	Open time: 6pm Close time: 10pm
Event organizer: Las Cruces Event Planning		Organizer phone: 575-642-8338	
Event location		Facility type	
Indoor event <input type="checkbox"/>	Outdoor event <input type="checkbox"/>	Booth <input type="checkbox"/>	Permanent building <input type="checkbox"/> Mobile <input type="checkbox"/> Push cart <input type="checkbox"/>

For sections 3-10 (below) please refer to attached Chart 10-1 for TFE requirements

Section 3 - Menu		
Menu item	Place of purchase	Prepared
		Prepared on-site at TFE <input type="checkbox"/> Prepared at other location** <input type="checkbox"/> Sold commercially prepackaged <input type="checkbox"/>
		Prepared on-site at TFE <input type="checkbox"/> Prepared at other location** <input type="checkbox"/> Sold commercially prepackaged <input type="checkbox"/>
		Prepared on-site at TFE <input type="checkbox"/> Prepared at other location** <input type="checkbox"/> Sold commercially prepackaged <input type="checkbox"/>
		Prepared on-site at TFE <input type="checkbox"/> Prepared at other location** <input type="checkbox"/> Sold commercially prepackaged <input type="checkbox"/>
		Prepared on-site at TFE <input type="checkbox"/> Prepared at other location** <input type="checkbox"/> Sold commercially prepackaged <input type="checkbox"/>
		Prepared on-site at TFE <input type="checkbox"/> Prepared at other location** <input type="checkbox"/> Sold commercially prepackaged <input type="checkbox"/>

(Additional menu items may be attached to this application)

** Food menu item prepared at other locations complete the following	
Name of establishment:	Type of establishment:
Permit holder name:	Establishment phone:
Permit #:	

(Additional locations for preparation of food items may be attached to this application)

Section 4 - Booth Construction		
Overhead covering:	Floor:	Walls:
<i>Example: Canopy</i>	<i>Asphalt</i>	<i>Screens with ability to cover solid</i>
Ceili	Carpe	Indoor



Section 5 - Handwashing Set-up (Hand soap, paper towels and trashcan must be provided at all set-ups)			
Type of handwashing:	How will water be heated:	Bare hand contact eliminated by:	
Container with on/off spigot and catch bucket <input type="checkbox"/> Portable handwashing sink <input type="checkbox"/> Handwashing sink w/ hot & cold running water under pressure <input type="checkbox"/>	Auxiliary heating source (i.e. burner) <input type="checkbox"/> Water heater <input type="checkbox"/> Other <input type="checkbox"/>	(check all that apply)	
		Dispensing units <input type="checkbox"/>	Deli tissue <input type="checkbox"/>
		Utensils <input type="checkbox"/>	Gloves <input type="checkbox"/>
		Other:	

Section 6 - Utensil Washing Set-up (Must wash with soap, rinse with water and sanitize all utensils/dishes)			
Method of utensil washing:	How will water be heated:	Type of sanitizer:	
3 Basins (i.e. bus tub) <input type="checkbox"/> 3 Compartment sink <input type="checkbox"/> 3 Compartment sink w/ hot & cold running water under pressure <input type="checkbox"/>	Auxiliary heating source (i.e. burner) <input type="checkbox"/> Water heater <input type="checkbox"/> Other:	(select) (Concentration)	
		Chlorine (bleach) <input type="checkbox"/>	100 PPM
		Quaternary ammonia <input type="checkbox"/>	___ PPM
		Iodine <input type="checkbox"/>	___ PPM
(Appropriate test-strips required)			

Section 7 - Utility Supply and Disposal			
Water source	Waste water disposal	Power Supply	Trash disposal
<i>Example: City water</i>	<i>Wastewater containers provided by organizer</i>	<i>Generator</i>	<i>Dumpsters available</i>
City Water	Wastewater containers provided by organizer	Indoor	Dumpsters available

Section 8 - Equipment (Use additional sheets if needed)		
Use:	Type:	Certification: (examples include: NSF, ETL)
Transportation to event hot/cold foods (Example: Insulated container, cooler, etc.)		
Cold holding (Example: Refrigeration, prep table, etc.)		
Hot holding (Example: Steam table, grill etc.)		
Cooking/ Re-heating (Example: Grill, stove, burners etc.)		
Food thermometers (Example: Metal Stem 0-220°F)		
Other		



Section 10 - TFE Floor Plan

In the following space, provide a drawing of the TFE. Identify and describe all equipment including cooking and hot/cold holding equipment, handwashing facilities, worktables, dishwashing facilities, food and utensil storage, garbage containers, and customer service areas.

<p>Example Floor Plan (view from top)</p>	<p>Draw your sketch here</p>
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STATEMENT: I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior permission from the State of New Mexico Environment Department may nullify final approval. I agree to comply with **7.6.2 NMAC -- Food Service And Food Processing Regulations** and allow the regulatory authority access to the establishment and records.

Applicant or responsible representative(s) Signature/Title	Date
Applicant or responsible representative(s) Signature/Title	Date

NMED use only		
Approved <input type="checkbox"/> Approved with conditions* <input type="checkbox"/> Denied** <input type="checkbox"/>	TFE category: Type 1 <input type="checkbox"/> Type 2 <input type="checkbox"/> Type 3 <input type="checkbox"/>	Date: Permit #: Permit fee required: Yes <input type="checkbox"/> No <input type="checkbox"/> Permit fee received: Yes <input type="checkbox"/> No <input type="checkbox"/>
Signature/Title:		Date:
*Conditions of approval:		
**Reasons for denial:		



Chart 10-1

	Type 1	Type 2	Type 3
Menu	-unpackaged non-TCS*** -commercially processed packaged TCS*** in original package (receive-store-hold)	-no cook (receive-store-minimum prep*-hold-serve) -same day prep (receive-store-minimum prep*-cook-hold-serve) -reheat commercially processed (receive-store-reheat-hold-serve)	-complex food prep (receive-store-prep-cook-cool-reheat-hot hold-serve) OR serving highly susceptible population
Handwashing	gravity fed <= 4 hrs. - insulated container or auxiliary heating source > 4 hrs. - auxiliary heating source	same as Type 1	hot & cold running water under pressure
3-Compartment Sink	unpackaged non-TCS <= 4 hrs. - 3-comp or extra utensils > 4 hrs. - 3-comp required packaged TCS: not required	same as Type 1 unpackaged non-TCS	3-comp required w/ hot & cold running water under pressure
Refrigeration	unpackaged non-TCS: not required packaged TCS: <= 1 day - insulated ice chest w/drain ice 2-3 days - mechanical equipment > 3 days - mechanical ANSI equipment only	same as Type 1 packaged TCS	mechanical ANSI equipment only
Cold holding (e.g., prep table, display case)	unpackaged non-TCS: not required packaged TCS: -ice bath -2-3 days - mechanical equipment recommended - > 3 days - mechanical ANSI equipment recommended	same as Type 1 packaged TCS	same as Type 1 packaged TCS
Hot holding	not allowed	covered non-ANSI equipment allowed**	covered ANSI equipment only
Cooking/reheating	not allowed	covered non-ANSI equipment allowed**	covered ANSI equipment only
Flooring	grass; smooth, durable, easily cleanable such as: concrete, machine-laid asphalt, Sealed wood, tile, impermeable tarp	<= 2 days - same as Type 1 > 2 days - same as Type 1, no grass	<= 3 days - same as Type 1, no grass > 3 days - constructed flooring
Walls	unpackaged non-TCS <= 3 days - no sides, ability to cover solid > 3 days - 3.5 side screening, ability to cover solid packaged TCS: not required	<= 1 day - no sides, ability to cover solid 1 to 3 days - 3.5 side screening, ability to cover solid > 3 days - complete enclosure w/approved opening	complete enclosure w/approved opening
Training	as required by regulatory authority	as required by regulatory authority	Certified food protection manager required

*Minimum preparation includes activities such as: slicing/cutting fruits and vegetables, opening commercially PACKAGED TIME/TEMPERATURE CONTROL FOR SAFETY FOOD, and seasoning TIME/TEMPERATURE CONTROL FOR SAFETY FOOD. Minimum preparation does not include activities such as: cutting, slicing, or forming raw MEAT, POULTRY, or FISH; assembly of complex menu items.

**Chafing dishes may be allowed for events of 4 hours or less. Insulated ice chests and slow cookers are not allowed for hot holding. Slow cookers are not allowed for heating, cooking, or reheating.

*** "TCS" means "Time/Temperature Control for Safety Food". See definition on page 21 of the Retail Food Field Guide for details.