

# 18<sup>TH</sup> ANNUAL CHILI MADNESS CHILI COOK OFF SATURDAY OCTOBER 12, 2019 OFFICIAL RULES

- 1. All chili is to be cooked on site from scratch, the day of the event. All chili must be cooked in designated location.
- 2. Cooks may begin setting up at 9:00 AM. You are asked to off-load equipment and then park either in the lot south of Main Street or on any adjacent street. Cook's meeting is at 10:30 AM and cooking starts at 11:00 AM. Judging will begin at 3:00 PM. NO PRECUTTING OR COOKING BEFORE 11:00 AM!
- 3. Scratch is defined as no pre-cut or marinated meat or other ingredients. Chili powder and commercial chili mixes are permitted.
- 4. All ingredients are to be commercially available. **NO WILD MEAT!** Meat will be presented to judges in a sealed commercial package. Be prepared to present a receipt for you ingredients.
- 5. Cooks are to prepare a minimum of 3-4 gallons of chili. In past years we have had teams run out and were not able to be judged for the People's Choice Award.
- 6. Contestants are responsible for providing all needed utensils including cooking surface. If you have a canopy you may use it. Tables will not be provided.
- 7. Contestants are not permitted to bring any alcohol. It is against the LCC rules and violators will be asked to leave.
- 8. Sanitation. Cooks are to prepare and cook chili in a sanitary manner. Wash, rinse and sanitize stations will be provided for you use. The Kent County Health Department will be on site to inspect and insure that you are preparing in a sanitary manner.
- 9. Only one chili per entry allowed. If you wish to enter two chilies', a second entry fee must be paid.
- 10. Judging will be by an independent panel as in past years. Each entry is a blank to the judges. Prizes will be awarded for 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> place and People's Choice. Chicken chili will be judged separately and awarded a prize, but as you all know, it's not REALLY chili!
- 11. All left over chili must be taken with you when you pack up.
- 12. Live music will be provided from 1 PM until 5 PM.
- 13. MOST IMPORTANT IS TO HAVE FUN AND BE CREATIVE! IT'S A DAY TO RELAX, HAVE FUN AND RAISE MONEY FOR A GREAT CAUSE!

## **Lowell Area Historical Museum**

# LARKIN'S 18<sup>TH</sup> ANNUAL CHILI MADNESS CHILI COOK OFF SATURDAY OCTOBER 12, 2019

# **ENTRY FORM**

ENTRY FEE IS \$25.00 PAYABLE TO LARKIN'S

TEAM NAME:	
SPONSOR:	
HEAD COOK:	
TEAM MEMBERS:	
TEAM	
CONTACT:	
ADDRESS:	
PHONE:	
EMAIL:	
CHILI CATEGORY:	Red ChiliWhite Chili
T-SHIRT SIZES:Sm (2 per team)	nallMediumLargeX-Large

## MICHIGAN TEMPORARY FOOD ESTABLISHMENT LICENSE APPLICATION

AΡ	PLICANI/BUSINESS CONTAC	, I II	IFORMATION:				
Org	ganization/Business Name:						
Ма	in Contact:		Em	ail:_			
Ма	iling Address:	City:			State: Zip:		
Pri	mary Phone:		Cell Phone:		Fax :		
Alte	ernative Contact: Name:			_ Pł	none:		
PU	BLIC EVENT INFORMATION:	Nan	ne of Public Event:				
Foo	od Service Start Date:/	/	Serving Start Time:		_ AM/PM		
End	ding Date:/E	nd T	ime: AM/PM				
Wh	en will food preparation begin?	Dat	te:/Starting	Tim	e:AM/PM		
Eve	ent Location (Name & Address):						
If	Applicable, Non Profit Tax ID#	·					
			BE PROPERLY EQUIPPED AND <u>Re<i>f</i></u> IRE TO DO SO MAY RESULT IN DEN		TO OPERATE BY THE TIME INDICATED,  OF MY LICENSE.		
Δ	nnlicant Name (Print)						
A	Applicant Signature: Date:						
Est	timated Number of Meals to be	e Se	rved Each Day:				
ΕQ	UIPMENT LIST:						
	_	npor	ary food establishment. Check a	ll bo	xes that apply.		
<b>A O O O O</b>	Hand Wash Station Large insulated container with a spigot, warm water, hand soap, paper towels and a large catch bucket Hand sink Self-contained portable unit Other		Cooking/Reheating Equipment Grill/BBQ Fryer Oven Roaster Other		Cold/Hot Holding Equipment Ice chest/cooler with ice Refrigerator Freezer Steam table Grill/BBQ Chafing dish w/ fuel Slow cooker/roaster Other		
<b>D</b>	Floor/Overhead Protection* Food is prepared & served indoors Floors are cleanable and Impermeable Describe: Canopy/tent Screening Other		Cleaning/Sanitizing Three basins to wash (dish soap), rinse (clear water) and sanitize (sanitizer) Extra utensils Bucket with sanitizing solution and wiping cloth(s) Sanitizer	F 0 0 0 0 0 0	Other Chemical test strips to test sanitizer solution Metal stem thermometer Gloves Hair restraints Electricity available Water source (circle all that apply) Municipal/City Water Well Bottled		

<sup>\*</sup>If extensive food handling occurs, it must be done in a fully enclosed space.

#### **FOOD PREPARATION AND MENU:**

Only food and beverage items listed will be approved to serve. Approval for any changes must be requested before the event.

Food	Food Source (place/facility where food is purchased)	H Off-Site Prep Yes/No	I On-Site Prep Yes/No	J Transport to event? (Hot or Cold, What type of equipment for transport)	K Cold holding equipment used at event?	L Cooking/reheating equipment used? Final cook/reheat temperature?	M Cooling?	N Hot holding equipment used?
Example:				, ,				
Hamburger	Jane's Food Service	No	Yes	Cold, Ice Chest	On-site refrigerator	Grill, 155 °F	No	Steam table

FOR LOCAL HEALTH DEPARTMENT USE: Notes:	Amount Paid:	_ Receipt Number:		

<sup>\*1 –</sup> IF FOODS ARE MADE OFF-SITE, PLEASE FILL OUT ADDENDUM A (COMMISSARY AGREEMENT)
\*2 – IF YOU PLAN TO COOL ANY FOOD, CONTACT YOUR INSPECTOR TO DISCUSS THE METHOD YOU WOULD USE.

#### **ADDENDUM A:**

### **COMMISSARY AGREEMENT**

Organizations or individuals requiring the use of an off-site kitchen facility must obtain a review and approval, by the licensing agency, of the off-site kitchen facility at the time of license application. Inspection fees may apply if the facility is NOT currently licensed as a permanent food establishment. If you change the commissary location prior to the event, notify the department to update the commissary agreement. It may be required that you provide a copy of the Commissary Food License.

Temporary Food Service Operator requiring the use of an off-site kitchen facility must complete the following information: Licensed Food Service Operator/Owner Organization Name & Address of Licensed Facility Used Facility License Number For: \_\_\_\_\_ Food Preparation \_\_\_\_ Cold Food Storage \_\_\_\_ Cooking \_\_\_\_ Cooling Food \_\_\_\_ Hot Holding \_\_\_\_\_ Dry Food Storage \_\_\_\_\_ Warewashing \_\_\_\_\_ Approved Water Supply \_\_\_\_ Waste water Disposal Other: Date(s) Licensed Facility will be used for this event: to Time of use: AM/PM to AM/PM Signature of Licensed Facility Owner/Operator Date For Office Use Only APPROVED DENIED COMMENTS: