



Winnebago County Health Department

Mail To: 555 N. Court St.

P.O. Box 4009, Rockford, IL 61110-0509

Phone: (815) 720-4100 Fax: (815) 720-4203

Email: environmental@wchd.org Website: www.wchd.org

FOR OFFICE USE ONLY

Date: _____

Amt. Rec'd: _____

Prorated/Late Fee: _____

Check./Cash/Credit: _____

Receipt No: _____

Permit No: _____

APPLICATION FOR FOOD AND BEVERAGE PERMIT

Food and Beverage Permits are non-transferable and non-refundable.

Note: Instructions for application processing are on the reverse side of this page. Please read carefully to ensure that the information is completed and accurate.

ESTABLISHMENT: _____ ADDRESS: _____

Name

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EXT: _____ FAX: _____

E-MAIL: _____ WEBSITE: _____

Water Service:	City	Private Well (If WELL: submit copy of coliform and nitrate tests taken within last 12 months)
Sewer Service:	City	Septic (If SEPTIC: submit most recent pumping receipt)

SEASONAL: YES NO DATE TO OPEN: _____ DATE TO CLOSE: _____

CATERING: YES NO

NAME OF FULL TIME CERTIFIED MANAGER	CERTIFICATE #	EXPIRATION DATE
_____	_____	_____

DAY(S) OF WEEK OPEN: _____ OPENING TIME: _____

OWNER OF BUSINESS: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EXT: _____ FAX: _____

E-MAIL: _____ WEBSITE: _____

MAIL TO: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Applicant hereby states he/she is familiar with the provisions of the Health Ordinance of Winnebago County and that he/she will operate this establishment in compliance with said provisions at all times.

APPLICANT'S SIGNATURE

COUNTY SANITARIAN

**By typing your name in the above signature box, you are electronically signing this document.

APPLICATION INSTRUCTIONS: Fill out application in its entirety and return it to the Health Department together with the required fee based on the fee schedule on back. Delays in permit mailing may be the result of an incomplete permit application form. Make checks payable to WCHD. If the establishment is owned by a corporation. The names and addresses of the corporation officers must be provided.

FOR NEW OWNER OR NEW FACILITY: Review of the facility, menu and operation is required, therefore the application must be pre-approved by a Health Inspector prior to submitting any payment. WARNING: Refund may not be granted for any payment without a pre-approved application.

The table below shows the date range for when each type of permit is valid.

Permit Type	Permit Start Date	Date Permit Expires
High Risk	April 1 st	March 31 st
Medium Risk	July 1 st	June 30 th
Low Risk	October 1 st	September 30 th

Below are the due dates for the renewal application for each type of permit. A LATE FEE SHALL BE ASSESSED IF THE PERMIT RENEWAL APPLICATION FORM AND APPLICABLE FEES ARE NOT RECEIVED OR POSTMARKED BY THE 1ST LATE FEE DATE AS DESCRIBED IN THE TABLE BELOW. A SECOND LATE FEE WILL BE ADDED IF THE PERMIT RENEWAL APPLICATION FORM AND APPLICABLE FEES ARE NOT RECEIVED OR POSTMARKED BY THE 2ND LATE FEE DATE AS DESCRIBED IN THE TABLE BELOW.

Permit Type	Renewal Applications Due Date	1 st Late Fee Date:	2 nd Late Fee Date:	Penalty/ Late Fee
High Risk	APRIL 1	APRIL 15	MAY 15	\$75.00 EACH
Medium Risk	JULY 1	JULY 15	AUGUST 15	\$75.00 EACH
Low Risk	OCTOBER 1	OCTOBER 15	NOVEMBER 15	\$25.00 EACH

FEE SCHEDULE and CLASSIFICATION

Regardless of whether consumption is on, in or off the premises or if there is a charge for the food, a food permit is required. This provision excludes private homes where food is prepared for individual family consumption.

- High Risk (CATEGORY I) - seating 0-50** **\$500.00**
- seating 51-100 **\$555.00**
- seating 101-150 **\$605.00**
- seating 151-200 **\$655.00**
- seating 200+ **\$710.00**

All schools and nursing homes will be charged a flat fee of \$500.00

A High Risk permit is required for all establishments where food is prepared for individual service as described below and where potentially hazardous food(s) are:

1. Extensively handled, completely prepared, and cooled;
2. Held hot or cold for twelve hours or more before serving;
3. Reheated after previously having been cooked and cooled,
4. Prepared for off-premises service;
5. Required to have time-temperature controls;
6. Sealed in reduced oxygen packaging;
7. Served to predominately immune-compromised populations.

Medium Risk (CATEGORY II) - \$285.00

A Medium Risk permit is required for all establishments that hold hot or cold foods: where food is prepared for individual service as described below and where potentially hazardous food(s) are:

1. Held for not more than twelve hours before serving.
2. Not reheated;
3. Prepared foods for service from raw ingredients using only minimal assembly;
4. Obtained from an approved source in a prepared state when complex preparation is required.

Low Risk (CATEGORY III) - \$170.00

A Low Risk permit is required for all establishments having only pre-packaged foods and/or dispensed beverages.



MOBILE VENDORS — Should have a mobile unit specific application

Medium Risk (CATEGORY II) M - MOBILE VENDORS - \$285.00

A **Category II M** permit is required for all vehicle mounted food service facilities having and serving cold and hot foods.

Low Risk (CATEGORY III) M - MOBILE VENDORS - \$170.00

A **Category III M** permit is required for all vehicles mounted door-to-door sales facilities, having only pre-packaged foods and/or dispensed beverages.

If you have any questions regarding the risk or type of permit you should apply for, please contact WCHD at 815-720-4100.

- Do not change your risk without consulting WCHD first. (815) 720-4100.
- Permits will not be issued until all current and outstanding fees are received.