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FOR OFFICE USE ONLY
Date:
Amt. Rec'd:
Late Fee:
Check./Cash/Credit:
Receipt No:
Permit No:

Fee Schedule on reverse side

2017 Application for Special Event Permit

As prescribed in Article III, Chapter 50, Section 50-76, Winnebago County Ordinance, Food Establishments, the undersigned hereby makes application and agrees to the requirements for a permit to operate a Special Event in Winnebago County. Application is for up to six dates in a six month period at a specified locations and dates with a consistent menu and same day food preparation.

Establishment Name: Phone #:
Owner/Operator: Fax #:
Address: City: State: Zip:
E-mail: Alternate phone #:
Food: [ ] Hot [ ] Cold [ ] Pre-packaged
Menu:
Food Source(s):
Date(s) and time(s) of food preparation:
Time of set up at 1st event: Time of service at 1st event:

\*\*\* MECHANICAL REFRIGERATION REQUIRED FOR MULTIPLE DAY EVENTS\*\*\*

(Check all that apply)
Food Protection: [ ] Off-ground [ ] Sneeze/Cough Protection [ ] Covered/Wrapped
Cooking Method: [ ] Grill [ ] Electric steam table [ ] Gas steam table [ ] Fryers
[ ] Roaster [ ] Other (explain):
Environmental Protection: [ ] Trailer [ ] Tent [ ] Canopy/Umbrella [ ] Indoors
[ ] Pre-packaged [ ] Individually wrapped [ ] Lidded containers
Source of Water: [ ] Public [ ] Private Well [ ] Transported
Handwashing: [ ] Hand sink [ ] Soap [ ] Paper towels
[ ] Spigot thermos w/catch bucket [ ] Two bucket system
Utensil Washing: [ ] Extra utensils [ ] 3-compartment sink [ ] 3 containers
Sanitizer type:
Waste water disposal:

**Events listed below will be the only events approved for this permit at this location.**

Special Event Establishment Permit (6 Month Period) *May 1 <sup>st</sup> - Oct 31 <sup>st</sup> or *Nov 1 <sup>st</sup> - Apr 30 <sup>th</sup>	Location Consistent	Menu Items Consistent	Category 3 Low Risk	Category 2 Medium Risk	Late Fee (8-13 days out respectively)	Late Fee (less than 7 days out respectively)
<b>Special Event A: 1 date/6 months</b>	<b>No</b>	<b>Yes</b>	<b>\$50.00</b>	<b>\$75.00</b>	\$10.00 – low risk \$25.00 – med. risk	\$20.00 – low risk \$75.00 – med. risk
<b>Special Event B: 2 to 3 dates/6 months</b>	<b>No</b>	<b>Yes</b>	<b>\$100.00</b>	<b>\$150.00</b>	\$10.00 – low risk \$25.00 – med. risk	\$20.00 – low risk \$75.00 – med. risk
<b>Special Event C: 4 to 6 dates/6 months</b>	<b>No</b>	<b>Yes</b>	<b>\$150.00</b>	<b>\$300.00</b>	\$10.00 – low risk \$25.00 – med. risk	\$20.00 – low risk \$75.00 – med. risk

Re-inspection fees are \$25.00 for low risk and \$50.00 for medium risk establishments.

List all event dates and location: \_\_\_\_\_

**VENDOR CLASSIFICATIONS**

**Medium Risk (Category II) Temporary Food Establishment**

Has few food handling operations and includes facilities that routinely:

- 1) Hot hold or cold hold food for use that day, or
- 2) Prepare menu items that require minimal handling, or
- 3) Menu item requiring complex preparation are prepared from commercially canned, packaged, or frozen foods to limit handling.

**Low Risk (Category III) Temporary Food Establishment**

Has few or no food handling operations and include facilities that routinely:

- 1) Serve only pre-packaged foods, or
- 2) Prepare and serve only non-potentially hazardous food such as snack foods or soda, or
- 3) Serve only non-alcoholic or alcoholic beverages

**STATEMENT:** I hereby confirm that the information is correct, and fully understand that any deviation from the above information may result in suspension of the Temporary Food Establishment/Special Event permit. More than one incident of misrepresentation may result in a Food Establishment/Person being denied a Temporary Food Establishment/Special Event Permit for any type of event up to 18 months.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**THIS PERMIT IS NOT TRANSFERABLE BY ESTABLISHMENT/PERSON OR BY SPECIFIED LOCATION FOR SPECIFIED DATES LISTED ABOVE.**