MCHENRY COUNTY DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
2200 NORTH SEMINARY AVENUE
WOODSTOCK, ILLINOIS 60098
PH: 815-334-4585
FAX: 815-334-4637
WEBSITE: www.mcdh.info

OFFICE USE ONLY	STAFF INITIALS:
DATE RECEIVED:	
CHECK # / CREDIT CARD:	
AMOUNT RECEIVED:	
RECEIPT NUMBER:	
PERMIT NUMBER: **T-**	

TEMPORARY FOOD ESTABLISHMENT HEALTH PERMIT APPLICATION

******VALID FOR NO MORE THAN 14 CONSECUTIVE DAYS AT A SPECIFIED FIXED LOCATION.******

TEMPORARY FOOD ESTABLISHMENT INFORMATION		
Risk Category: ☐ ONE (high) ☐ TWO (medium)		
Establishment/Organization Name:		
Festival Information	Festival Name:	
	Festival Contact Person Name:	
	Festival Contact Person Phone Number:	
	Festival Contact Person Email:	
Owner Information	Name:	Address:
	Phone:	City, State, Zip:
	Email:	
Person in Charge Information	Name:	Address:
	Phone:	City, State, Zip:
	Email:	
Address to be held at (street address, city, state, zip):		
Date to Open:		Date to Close:
Setup Time (AM/PM):		Serving Time (AM/PM):
Time Establishment will be ready for inspection (AM/PM):		
Is this your first Temporary Food Event at this location for the current year? ☐ Yes ☐ No		
Certified Food Protection Manager Information	Name:	
	Certificate Number:	
	Certificate Expiration Date:	

TEMPORARY FOOD EVENT DESCRIPTIONS AND FEE SCHEDULE		
Category One	Foods with extensive or complicated preparation, high risk foods, or high risk operations (i.e. freshly made chili, soups, ribs, barbeques, chicken, tacos, egg rolls, pig roasts, shish-kebabs, pizza prepared on site, prepared salads, etc.).	**$70.00**
Category Two	Foods with limited preparation or handling (i.e. hot dogs, hamburgers, brats, nachos and cheese, canned chili or barbeques, pizza assembled/cooked off site, scooped ice cream, **pre-cooked** items, prepared ice cream [sundaes, shakes, ice cream drinks, etc.], corn on the cob, funnel cakes, etc.). **Includes sampling** if not pre-packaged at an approved facility (also applies to in-home baking and commercially prepared Time/Temperature Control for Safety Food, excludes cottage food vendors at farmers' markets with IDPH sampling certificate.)	**$45.00**
Category Three	Pre-packaged, non-Time/Temperature for Safety Foods (i.e. canned pop, bagged chips, candy bars) and/or pre-packaged ice cream. Exempt from fees and permit, but not requirements of Article III. See educational flyer on website "**Do I need a Temporary Health Permit?**"	**No Permit – No Fee**
Late Fees	If application and fee are not received at least five (5) days prior to the event, a late fee will be assessed.	**$25.00**
Festival Permit	Organizations, facilities, or individuals taking responsibility for multiple separate food stands can take out a festival permit. Food stands can be either category one (1) or two (2).	**$440.00** up to 10 food stands **$35.00** each over 10

One temporary food event is allowed per sponsor, per single location, per calendar year. Permits may be renewed provided:

1. The event is under direct supervision of a Certified Food Protection Manager, **present onsite at all times of operation;**
2. Past events were in substantial compliance with Ordinance requirements; and
3. Permit applications and fees have been submitted to the Department.

Please Check all that Apply:	Water Supply: ☐ Municipal	☐ Self-Contained
	Sewage Disposal: ☐ Municipal	☐ Self-Contained

FOOD INFORMATION
Menu:
Are all menu items purchased pre-cooked? ☐ Yes ☐ No
Food Purchased From:
Mode of Transportation:
Travel Distance:
Temperature maintenance during transport:
If items are purchased prior to the event, how and where are they being stored?
Is there food preparation prior to the event? ☐ Yes ☐ No Where:
Are you offering food samples? ☐ Yes ☐ No What samples are you offering? How are you dispensing your samples?

MENU ITEMS / FOOD PREPARATION METHOD

The McHenry County Health Department Division of Environmental Health reserves the right to exclude any menu items.

Menu Item **List ALL items that will be served/sold except canned sodas, bottled water, bagged chips, or candy bars.**	**Samples Only**	**Raw Food Cooked Onsite**	**Food Cooked at Licensed Facility** (transported hot)	**Food Cooked at Licensed Facility** (reheated onsite)	**Food Items Commercially Prepared** (no cooking)	**Other** (please describe)

TEMPORARY FOOD STAND PREPAREDNESS QUESTIONS ***Food purchased prior to event must either be stored in a licensed facility or purchased the day of the event.*** ***NO FOOD MAY BE STORED OR PREPARED AT HOME.***
1.) How are foods thawed?
2.) How are all food/single service items being store? (6" above ground)
3.) Where will food be stored prior to the event? ☐ Licensed Food Facility (name and address of facility): ☐ Purchased food the day of the event
3.) What type of setup will be used for washing, rinsing, and sanitizing of utensils and equipment? What type of sanitizer is being used? (i.e. bleach, quat, etc.)
4.) Describe hand washing station setup being used: ***Note: hand sanitizers are NOT an acceptable substitute for required hand washing setup.***
5.) What type of canopy covering will be used to protect food preparation and serving area?
6.) What type of condiments are being used? (i.e. individually packaged, squeeze bottles, open bulk, etc.)
7.) How is the food stand capable of maintaining hot/cold food temperatures, 41°F or below and 135°F or above, at all times (i.e. cooler, refrigerator, chaffing dishes, grill, etc.):

	Yes	**Not Applicable**
8.) Only approved materials/equipment are to be used for food preparation/holding units (i.e. no enamelware roaster/crock pots)	☐	☐
9.) Food is not to be in direct contact with ice (ice containers should also have a drain)	☐	☐
10.) A cooler thermometer is required	☐	☐
11.) A metal stemmed thermometer is required	☐	☐
12.) Is there proper supervision at all times when food is being prepared?	☐	☐
13.) Have you read your *Temporary Food Events* brochure?	☐	

Fill out this application in its entirety and return same to the Health Department together with the fee. Make the check payable to the McHenry County Department of Health. If the establishment is in partnership or joint tenancy, both parties must sign the application. If the establishment is owned by a corporation, the names and addresses of corporate officers must be provided.
The applicant hereby states that he/she is familiar with the provisions of the Health Ordinance of McHenry County, Illinois, and that he/she will operate this establishment in compliance with said provisions at all times.

After this application has been filled out and turned in with the appropriate fee, a Health Practitioner will be contacting the establishment to go over temporary food health permit rules and regulations necessary for the operation during the event.

Applicant Signature & Print: _____ Date: _____

Environmental Health Practitioner Signature: _____

OFFICE USE ONLY		Environmental Health Practitioner Initials:
Date:	Talked To:	
Phone: ☐ Left Message ☐ No Answer		
Date:	Date:	Date: