



Public Health
Prevent. Promote. Protect.

Henry & Stark County Health Department
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103 1st Street., Colona, IL 61241 309-792-4011
www.henrystarkhealth.com

Received by: _____
Amount Received: _____
Date Received: _____

Permit # _____
(Office Use Only)

APPLICATION FOR TEMPORARY FOOD SERVICE OPERATION

Vendors who prepare or serve food three or more consecutive days are required to submit this completed form and the \$35.00 permit fee to the Henry & Stark County Health Departments five (5) days before the event.

Henry County Stark County

EVENT NAME _____ DATE(S) _____

Temporary Retail Food Establishment Name		Legal Owner's Name	
Establishment Address (Street, P.O. Box, City, State, Zip)			
Telephone Number:		Cell Phone Number:	
Contact Name		Contact #	
Fax #		E-mail	

Please list any additional events that you plan on participating in:

Event Name _____	Date _____	Location _____
_____	Date _____	Location _____
_____	Date _____	Location _____

PUBLIC EVENT INFORMATION

Name of Public Event _____

Event Start Date ____/____/____ Start time ____/____/____

End date ____/____/____ End time ____/____/____

Event location _____

Event Coordinator _____ Phone _____ E-mail _____

Water source City Water Private Well Bottled Water

Wastewater disposed Commissary City Sewer _____ Other _____

Note: Waste water CANNOT be dumped on the ground or into storm drains. Water must be placed in approved receptacle or sanitary sewer. Please find out from event coordinator where this is located for each event.

MENU (List all food items, including toppings and beverages)

Food item	How Served		Made to Order		Off-site Prep		On-site Prep		Describe preparation Method
	Hot	Cold	Yes	No	Yes	No	Yes	No	

OFFSITE FOOD PREPARATION Preparation at approved facility/commissary before event

Check which preparation procedure each menu item requires

Food	Thaw	Cut/ Assemble	Cook/ Bake	Cool	Reheat	Cold Holding	Hot Holding
1.							
2.							
3.							
4.							
5.							

Name of commissary _____ Location _____

Contact person _____ Phone number _____

Cooling How will foods be rapidly cooled to 41°F or below? (mark all that apply)

- Shallow pans (less than 4") in refrigerator or cooler Using an ice bath to cool the food product
 Ice paddle or wand Other (specify) _____

Reheating How will foods be re-heated to at least 165°F? (mark all that apply)

- Microwave Grill Oven Hotplate Other (specify) _____

Transport Distance that you will be transporting food to the event _____

Equipment used to control temperatures during transport

- Coolers with ice Cambros for cold foods Cambros for hot foods Other (specify) _____

HANDWASHING AND FOOD HANDLING

- I will be serving only prepackaged foods that require no preparation or cooking
 I will be serving foods that require preparation and/or cooking and will provide the following for Handwashing:
 - 1) a minimum of 2 gallons of warm potable water that must be filled as needed in a container with a 'hands-free' spigot
 - 2) soap
 - 3) paper towels
 - 4) 5 gallon bucket (minimum) to catch and contain wastewater until properly disposed of

Note: Hand "sanitizers" are NOT an acceptable substitute for required handwashing set up.

