



www.kanehealth.com

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2024 Application for Seasonal Food Handling Permit

As prescribed in Article II, Section C, Kane County Sanitation Ordinance, the undersigned hereby makes application for a permit to operate a food establishment in the County of Kane. Seasonal Temporary Events will include multiple temporary events within Kane County.

Name of Business: Phone #:

Owner: Fax #:

Address: City: State: Zip:

Email:

Food: Hot Cold Pre-packaged Type of Permit: New Renewal

Establishment Classification (see reverse): Anticipated Months:

Food Served:

Food Source:

Certified Food Protection Manager: Position:

Identification Number: Expiration Date:

(Please check all that apply) *** MECHANICAL REFRIGERATION REQUIRED ***

Food Protection: Off-ground Sneeze Shield Covered
Cooking Method: Grill Steam table/Electric Steam table/Sterno-Gas
Fryers Crock Pot other (explain)

Preparation Site: (location explanation)

Environmental Protection: Tent Trailer Umbrella Indoors
Pre-packaged Individually wrapped In covered containers
Source of Water: Public Private well Transported
Handwashing: Hand sink Dispensed soap Dispensed paper towels
Spiggoted thermos with catch bucket Handi-wipes (pre-packaged foods only)
Utensil Washing: Extra utensils 3 compartment sink 3 Containers
Sanitizer type Waste Water Disposal Method:

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-FOR OFFICE USE ONLY-

License Number: Issuance Number:

Permit Fee: \$ Category: Approved by:

Events listed below will be the only events approved for this permit.
 ADDITIONAL BOOTHS WILL REQUIRE A SEPARATE TEMPORARY PERMIT TO BE ISSUED

Event Name(s)	Event Location	Event Date

VENDOR CLASSIFICATIONS

CATEGORY II - \$479.00 (Certified Food Protection Manager Required at all times)

Has few food handling operations and includes facilities that routinely:

- 1) hold hot or cold food for use that day, or
- 2) prepare menu items that require minimal handling, or
- 3) menu items requiring complex preparation are prepared from canned, frozen, or fresh-prepared foods to limit handling.

CATEGORY III - \$315.00

Have 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.

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I AFFIRM THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF

Date: _____ Signature: _____

THIS PERMIT IS NOT TRANSFERABLE TO ANOTHER PERSON OR EVENT NOT LISTED ABOVE

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