

Bayfield County Retail Food Service Permit Application

Application is for: New Establishment Change in Ownership Other, please specify _____

ESTABLISHMENT AND LICENSEE INFORMATION:

PLEASE PRINT OR TYPE

Establishment Name: _____

Establishment Address: _____
Street Address City Zip Code

Establishment Phone: () _____ e-mail: _____

Legal Licensee (such as LLC, LLP, Inc.): _____

Agent for the Corporation (if applicable): _____

Licensee Address: _____
Street Address City Zip Code

Licensee Phone: () _____

Name of Former Operator: _____

Name of Former Business: _____ ID#: _____

Intended Date of Opening for Business: _____

Please check the appropriate box when your business is in operation:

Year Round Summer Winter

RETAIL FOOD SERVICES PROVIDED:

PLEASE CHECK APPROPRIATE CATEGORY

A. THIS ESTABLISHMENT DOES NOT ENGAGE IN FOOD PROCESSING; sells only pre-packaged, potentially hazardous foods (foods that require cooling or freezing).

B. PROCESSING FOOD AT RETAIL – Complete items 1 thru 3.

1. Do you intend to process potentially hazardous foods? YES NO

2. Annual dollar volume \$_____. Enter total gross retail food sales at this location during the last 12 months. (If not operating that long, estimate expected sales for a 12-month period.)

3. Check ALL PROCESSING OPERATIONS listed below that this establishment will be conducting during the coming license year:

- | | | |
|--|---|---|
| <input type="checkbox"/> Bakery | <input type="checkbox"/> Meat Cutting | <input type="checkbox"/> Hot/Cold Beverages |
| <input type="checkbox"/> Catering | <input type="checkbox"/> Meat Distributor | <input type="checkbox"/> Ice Cream/Soft Serve |
| <input type="checkbox"/> Confectionary | <input type="checkbox"/> Produce Processing | <input type="checkbox"/> Ice Making |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Seafood Dept | <input type="checkbox"/> Freezing |
| <input type="checkbox"/> Delicatessen | <input type="checkbox"/> Shell Egg | <input type="checkbox"/> Mixing |
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Wild Game | <input type="checkbox"/> Grinding |
| <input type="checkbox"/> Salvage | <input type="checkbox"/> Smoking/Curing | <input type="checkbox"/> Popping Corn |
| <input type="checkbox"/> Limited Processor | <input type="checkbox"/> Vacuum Packing | <input type="checkbox"/> Bottling |
| | <input type="checkbox"/> Packing/Packaging | |

Retail Food Service Fee Categories:

(To be determined by Inspector at time of inspection)

	<u>License Fee</u>	<u>Pre-Inspection</u>	<u>Total Fee</u>
<input type="checkbox"/> Food sales of at least \$15,000,000 and processes potentially hazardous food	\$685.00	\$350.00	\$1,035.00
<input type="checkbox"/> Food sales of at least \$5,000,000 and less than \$15,000,000 and processes potentially hazardous food	\$685.00	\$350.00	\$1,035.00
<input type="checkbox"/> Food sales of at least \$1,000,000 and less than \$5,000,000 and processes potentially hazardous food	\$685.00	\$350.00	\$1,035.00
<input type="checkbox"/> Food sales of at least \$25,000 but less than \$1,000,000 and processes potentially hazardous food	\$265.00	\$250.00	\$ 515.00
<input type="checkbox"/> Food sales of at least \$25,000 and is engaged in food processing, but does not process potentially hazardous food	\$190.00	\$150.00	\$ 340.00
<input type="checkbox"/> Food sales of less than \$25,000 and is engaged in food processing	\$ 60.00	\$125.00	\$ 185.00
<input type="checkbox"/> Does not engage in food processing.	\$ 45.00	\$125.00	\$ 170.00

State of Wisconsin Restaurant Manager Certification(s):

<u>Name(s)</u>	<u>ID number</u>	<u>Expiration Date</u>
_____	_____	_____
_____	_____	_____

TOTAL AMOUNT ENCLOSED: \$ _____

Make Checks or Money Orders Payable to: Bayfield County Health Department

Send it along with this application to: Bayfield County Health Department, PO Box 403, Washburn, WI 54891

YOUR SIGNATURE BELOW WILL ACKNOWLEDGE THAT YOU HAVE RECEIVED A COPY OF THE CODE OR INFORMATION AS TO WHERE TO OBTAIN A COPY AND WILL COMPLY WITH ALL APPLICABLE WISCONSIN ADMINISTRATIVE CODE(S).

Signature of Licensee or Agent

Today's Date

Chapter 254.47(5) and 254.64(1)©, Stats. "No permit may be issued until all applicable fees have been paid."

Chapter 254.47(1), Stats. "No person...who has not been issued a permit under this section may conduct, maintain, manage or operate a campground and camping resort, recreational camp and educational camp or public swimming pool, as defined by department rule."

Chapter 254.64(1)(a), Stats. "No person may conduct, maintain, manage or operate a hotel, restaurant, temporary restaurant, tourist rooming house, vending machine commissary or vending machine if the person has not been issued an annual permit by the department or by a local health department that is granted agent status under s. 254.69 (2)."

Chapter 254.47(4) and 254.64(5), Stats. Permits released April 1 and after expire June 30 of the following year (except Body Art establishments).

Within **30 days** after receiving a complete application for a permit, the department or its agent shall either approve the application and issue a permit or deny the application. If the application for a permit is denied, the department or its agent shall give the applicant reasons, in writing, for the denial.

A permit shall not be issued to an operator without prior inspection.