



TREMPEALEAU COUNTY PUBLIC HEALTH
 36245 Main Street, PO Box 67
 Whitehall, WI 54773
 (715) 538-2311 X220 (715) 538-4861 Fax

For Office Use Only:	
ID Number	_____
Previous Name	_____
Check Number	_____
Date	_____
Initials	_____

PUBLIC FOOD FACILITY PERMIT APPLICATION

PLEASE CHECK ONE: New Establishment Change in Ownership Duplicate License

NAME OF FACILITY		FACILITY TELEPHONE NO.	
_____		_____	
		(Area Code)	(Phone Number)
LOCATION OF FACILITY			

(Address)	(City)	(State)	(Zip Code)
NAME OF LEGAL LICENSEE		TELEPHONE NO.	
_____		_____	
(Individual, firm, corporation, society, institution, public body, or any other entity.)		(Area Code)	(Phone Number)
LICENSEE ADDRESS		EMAIL	
_____		_____	
(If same location as "2. Location of Facility" above, then enter, "same")			

Make check payable to Trempealeau County Public Health and mail to above address.

Limited (pre-packaged foods only) <input type="checkbox"/> \$ 145 – Pre-Inspection <input type="checkbox"/> \$ 115 – Annual Permit Simple Risk* (also Special Organizations) <input type="checkbox"/> \$ 250 – Pre-Inspection <input type="checkbox"/> \$ 255 – Annual Permit Moderate Risk* <input type="checkbox"/> \$ 350 – Pre-Inspection <input type="checkbox"/> \$ 365 – Annual Permit Complex Risk* <input type="checkbox"/> \$ 550 – Pre-Inspection <input type="checkbox"/> \$ 595 – Annual Permit Additional Area <input type="checkbox"/> \$ 145 – Pre-Inspection <input type="checkbox"/> \$ 110 – Annual Permit <i>Complete reverse side for determining appropriate license category</i>	Restaurant Manager Certification:	Miscellaneous:
	<i>*One Certified Restaurant Manager is required at all simple, moderate and complex licensed food establishments. Limited excluded.</i>	<input type="checkbox"/> \$10 - Duplicate License <input type="checkbox"/> \$75 - Late Renewal Fee <input type="checkbox"/> \$100 - Consultation Fee
	Certified Restaurant Manager: Name: _____ ID Number: _____ Expiration Date: ____/____/____	REMINDER: <i>No license is transferable. Contact our Department if a change in owner or licensee occurs.</i>

Water Public Private **Seating Capacity:** _____

Intended Opening Date: ____/____/____ **Email:** _____

When is your facility open for business? Year Round Winter Summer

Planned hrs of operation?
 Sun _____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____

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	TITLE	TODAY'S DATE
_____	_____	_____

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. Permit will be issued according to: Chapter 254.47 (5) and 254.64 (1) (c), Stats., Chapter 254.47 (1), Stats., Chapter 254.64 (1) (a), Stats., Chapter 254.47 (4) and Chapter 254.64 (5), Stats.

RESTAURANT RISK ASSESSMENT MODEL:

Interpretation: The Wisconsin Department of Health identifies full service food licenses as simple, moderate or high risk facilities according to the food served, the method in which food is prepared and the population (seating) or number of people that are served at that facility.

Answer the questions below

1. Simple Risk Establishments:

- Yes No Serve food cooked to order.
- Yes No Limit the amount of hot holding (only for one meal period; that food will not be cooled and later re-served).
- Yes No Use very limited preparation. Pre-packaged products can be mixed together (example, shredded cabbage mixed with slaw dressing or concentrated soup mixed with water or milk then heated, etc.). Some minor preparation, such as slicing onions or pickles as condiments, is acceptable.

2. Moderate Risk Establishments:

- Yes No Include cooling and/or reheating of Potentially Hazardous Foods (PHFs).
- Yes No Serve products made from scratch.
- Yes No Seat fifty or more and/or have a drive-up/walk-up service window or delivery.
- Yes No Have a salad and/or food bar.
- Yes No Use raw poultry, eggs, meat, or seafood.
- Yes No Provide catering.
- Yes No Have banquet facilities.

3. Complex Risk Establishments:

- Yes No Contain 5 or more bullet points in the Moderate Risk Establishment category above.
- Yes No Have been ordered closed in the previous licensing year.
- Yes No Have been linked statistically to a foodborne illness in the previous licensing year.

Your facility is classified as: (circle appropriate classification)

SIMPLE

MODERATE

COMPLEX