## MENARD COUNTY HEALTH DEPARTMENT

## C/O SANGAMON COUNTY DEPARTMENT OF PUBLIC HEALTH

2833 South Grand Ave. East, Springfield, IL 62703 Phone (217) 535-3145 Fax (217) 747-5103

## APPLICATION FOR LICENSE TO OPERATE A TEMPORARY FOOD SERVICE ESTABLISHMENT

Three (3) to Fourteen (14) Day Lic	rense (\$60.00)	
One (1) to Two (2) Day License (\$3	Not-for-Profit (\$0.00)	
TYPE OF LICENSE AND FEES:		
rame	1D Number Expiration Number	
Name	ID Number Expiration Number	
If any Certified Service Sanitation Managers (not require	ed) will be present on site, please list their information:	
be prepared in residential kitchen facilities.	ity pre-approved by this Department. Food shall not	
Menu Items	Source (where menu items/ingredients are purchased)	
Event times of operation:		
Event Start Date: Event Location:	Event Setup time:	
_	If yes, method:n away if the inspector determines that it may be adulterated.	
Food Preparation Date: Prep Location	n: Prep time:	
Email:	•	
	City: Zip:  Alternate Telephone Number: ( )	
	Mobile Phone Number for day of event: ( )	
Estimated Number of People to be Served:		
	Vendor Name:	
Event Address:	City:	
Name of Event:		

## Temporary Food Event Checklist for Safe Food Handling

	Paper
DΙ	RTY EQUIPMENT Soap WATER Towels
	Three pans will be provided (or a three compartment sink) to wash, rinse,
	and sanitize food handling utensils. Utensils will be air dried.
	Type of sanitizer to be used: Verified with test strips.
	A bucket/spray bottles containing sanitizer solution will be provided to clean
	food preparation counters.
	All food preparation, cooking, service, and grills will be under a tent or roof.
	Provide fans (to provide an air curtain) or screens to reduce pest activity.
EN	MPLOYEE HYGIENE
	Hand washing facilities. A hand washing station as illustrated on a sink
	(not in a restroom) will be provided. Either must be within 20 feet of the place where food
	is being handled. Either must have running water, soap in a dispenser, and paper towels. (Note: Portable water supply must
	have spigot to allow water to flow freely – no push buttons allowed).
	Gloves will be worn by all people handling ready-to-eat food.
TL	EMDED ATTIDE ADJICE
	EMPERATURE ABUSE  Temperature Central: Cold food A1 degrees and hat food > 135 degrees or more after gooking
	Temperature Control: Cold food< <b>41 degrees</b> and hot food > <b>135 degrees</b> or more after cooking.
	Time Control: Once >41 or < 135, food must be sold or discarded after 4 hours
	A thermometer will be available for temperature checks.
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	OOKING/ REHEATING  Personal and fine all 125F are stick and a solate 145F are all to 155F are all interpretable at a solate 165F.
	Raw plant food cook 135F, raw fish/ pork cook to 145F, raw beef cook to 155F, raw chicken/turkey/reheat cook to 165F
	Review the reheating and cooling procedures
F(	OOD SOURCE
	Food will only be prepared on-site. There will be no home preparation of food.
	Off-site location approved <u>in advance</u> of the event by the SCDPH.
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	SCDPH APPROVAL:
I	have read the checklist above for safe food handling and agree to implement these practices at the temporary event. If I are
	not responsible for food handling at the event, I will provide this checklist to the person who is responsible for food handling
	and will make sure they agree to abide by these practices. If you have questions, or the event is cancelled, call SCDPH (21)
	535-3145) between 8:00 a.m. – 4:30 p.m. Monday – Friday. After those hours, call the Sangamon County Sheriff's Department
	non-emergency number (217-753-6666) and ask the dispatcher to contact the County Health Department.
	ion-emergency number (217-733-0000) and ask the dispatcher to contact the country freatur Department.
Sig	gnature <b>X</b> Date
Pri	inted Name
•	For Office Use Only
	To Office Ose Only

Inspection Date

Approval Date

Rev. 05/03/2018

Director of Environmental Health

Director of Public Health