

CLARK COUNTY HEALTH DEPARTMENT

997 N. York St., P.O. Box 266, Martinsville, IL 62442
Phone: 217-382-4207 Fax: 217-382-4226

Office Use Only Date Rec'd _____ Approval Date _____ Permit Number _____
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RETAIL/FOOD SERVICE ESTABLISHMENT PERMIT APPLICATION

Establishment Information:

Name _____ Phone _____
Address: _____
City _____ State _____ Zip Code _____

Applicant/Owner Information:

Name _____ Phone _____
Address _____
City _____ State _____ Zip Code _____

In case of emergency (recall, fire, etc.) after hours call:

Business Mailing Address (if different from above):

(Street) (City) (Zip Code)

Name of Owner or Operator

(As it will appear on the permit): _____

Application is hereby made for a Retail or Food Service Establishment within Clark County, Illinois. By this application this establishment is agreed to comply with the provisions of the Basic Sanitation Standards applicable to this type of food handling establishment and that said establishment will be open to inspection by the Clark County Health Department during all operation hours. It is further agreed that an annual inspection fee may be applicable. It is also agreed to notify the Health Department of any changes to the facility or closure of the establishment.

Signature of

Applicant/Owner _____ Date _____

The following checklists are used to determine the initial risk category, readiness for opening and appropriate permit fee.

Type of Ownership

- Individual
- Firm
- Corporation
- Partnership
- Not for profit institution
- Other _____

Type of Food Service

- Restaurant (diner, cafeteria, etc.)
- Tavern with kitchen facilities
- Tavern with prepackaged food only
- Retail food store and/or meat market
- Catering (food prepared on or off premises food consumption)
- Other _____

Retail Food Store Area

- 1 – 4,999 sq. ft.
- 5,000 – 15,000 sq. ft.
- >15,000 sq. ft.

Seating

- 0 – 50 people
- 51 – 75 people
- 76 – 100 people
- >100 people

Days/Hours of Operation

- Full time**-more than 182 days per year
- Seasonal**-less than 182 days per year and will serve food on days not necessarily covered by temporary events such as holidays, fairs, carnivals, fund-raisers, etc.

to Monday to Tuesday to Wednesday to Thursday
 to Friday to Saturday to Sunday

Water, Plumbing and Restrooms

- Plumbing fixtures have been checked by the State Plumbing Inspector
Date of Plumbing approval: _____ Approved by: _____
- Water meets EPA or IDPH standards
- If on public water supply, the water district is: _____
- Food facility sewage goes to an approved EPA or IDPH septic system
- A grease interceptor is used
- There is a three-compartment sink for dishwashing, space for air drying
- There is a mechanical or chemical dishwasher (optional)
- There is at least one hand washing sink for employees in the food service area supplied with soap, hot and cold running water and paper towels
- There is a mop sink
- Hand washing sink, three-compartment sink and mop sink have hot and cold running water
- Approved sanitizers and test strips are used as required
- Restrooms have self-closing doors, are handicapped accessible
- Restrooms have soap, hand-drying services (paper towels for employees) and hot and cold running water

Food Protection Facilities

- All refrigerators have thermometers and can maintain temperatures under 41°F
- All freezers have thermometers and can maintain temperatures at or under 0°F
- Hot and/or cold holding areas (including buffets) can maintain correct holding temperatures
- All outer openings are protected against entrance of insects and animals
- There are covered waste cans and/or dumpsters
- The dumpster is on a cement or asphalt pad
- A licensed pest control company will service the facility

Operation of Facility

- There is a procedure in place for employees who use bare hand contact on ready to eat foods
- There is a procedure in place in case of a boil order
- There is the IDPH advisory on undercooked foods posted, sign or printed on the menu
- There is a policy on how to handle sick employees or those with cuts, scabs or boils on hands, arms, or faces
- The majority of people served are either the elderly or young children
- There is a policy in place in accordance with the Smoke-Free Illinois Act (410 ILCS 82)
- List the name(s), certification number(s), and expiration date(s) of all employees who are Food Service Sanitation Managers: _____

** Unless the facility is a Class III, at least one certified personnel needs to be present per shift-*

Foods Prepared, Served and/or Sold

Include a menu for the establishment. Recipes may be required.

- All food is obtained from approved processing facilities
- There is a procedure on hot and cold holding temperatures
- There is a procedure on how to cool and reheat potentially hazardous foods
- All food is prepared the same day as served
- All leftover food is discarded at the end of the day
- Thermometers are available to test for proper food temperatures
- Some food is prepared for the next day

Please list foods prepared more than twelve (12) hours in advance of service.
