



2550 North Annie Glidden Road, DeKalb, IL 60115
 Main 815-758-6673 Fax 815-748-2485
 www.dekalbcountyhealthdepartment.org

2012 APPLICATION FOR FOOD ESTABLISHMENT PERMIT

I hereby apply for a Food Establishment Permit to operate the following food establishment within DeKalb County, State of Illinois:

Type or Print Information Only

ESTABLISHMENT INFORMATION

Name of Business _____ Fax _____
 Phone _____
 Address _____ City _____ State _____ Zip _____
 E-mail _____ Website _____
 Parcel Identification Number _____ (REQUIRED FIELD)

DIRECT BILLING STATEMENT/PERMIT TO

Name of Business Owner _____ Fax _____
 Phone _____
 Address _____ City _____ State _____ Zip _____

BUILDING OWNER

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

TYPE OF OWNER

Individual *Partnership *Corporation/LLC *Unit of Local Govt.
 *(Complete Contact Information on the back)

ESTABLISHMENT CLASSIFICATION (see reverse) _____ **TYPE OF PERMIT** New Renewal

SQUARE FEET _____ **SEATING CAPACITY** _____ **NUMBER OF EMPLOYEES** _____

SEASONAL (6 months or less) **NONSEASONAL** (more than 6 months)

BUSINESS HOURS _____ to _____ **DAYS CLOSED** _____

NAME OF CERTIFIED FOOD MANAGER _____

POSITION _____ **ID#** _____ **EXP. DATE** _____
 (Additional Certified Managers must be listed on the back)

WATER SUPPLY (check one) Public Private Date Water Tested _____

SEWAGE DISPOSAL (check one) Public Private

SEPTIC PUMPER _____ Last Date Pumped _____

GREASE TRAP DISPOSAL BY _____ (company name)

GREASE BARREL DISPOSAL BY _____ (company name)

PEST CONTROL CO. _____ (Name) _____ (Complete Mailing Address) _____ (Phone Number)

DATE _____ **SIGNATURE** _____

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

Establishment Number _____ Permit # _____

Permit Fee \$ _____ Class _____ Approved By _____

*** THIS PERMIT IS NOT TRANSFERABLE TO ANOTHER PERSON OR LOCATION ***

ESTABLISHMENT CLASSIFICATIONS

CLASS A - \$480.00

Store with meat cutting, deli, bakery

CLASS B - \$315.00

Restaurant; package food store; industrial feeding establishments; caterers; fraternity and sorority houses that prepare foods; taverns bars and nightclubs with food preparation; bottlers

CLASS C - \$165.00

Stores whose main order of business is not food, but sell potentially hazardous foods; taverns, bars, nightclubs serving only non-potentially hazardous prepackaged foods; retail liquor stores with prepackaged foods; seasonal restaurants that are open less than six months per year

CLASS D - \$130.00

Vegetable stands open more than fourteen consecutive days

Permit Year is July 1 to June 30

*Applications submitted after Jan 1 pay half the appropriate fee *(Applicable To New Food Establishments Only)*

*(Partnership, Corporation, Unit of Local Government, List Contact Information below)

Contact Person _____ **Address** _____

Phone _____ **E-mail** _____

(List Additional Certified Food Manager's Information below)

NAME OF CERTIFIED FOOD MANAGER _____

POSITION _____ **ID#** _____ **EXP. DATE** _____

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