



PIERCE COUNTY PUBLIC HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH PROGRAM
 412 West Kinne Street, P O Box 238
 Ellsworth, Wisconsin 54011
 (715) 273-6755 (715) 273-6854 FAX

Retail Food Establishment – Not Serving Meals: Permit Application

Establishment Name			
Establishment Address	STREET		
	CITY	STATE	ZIP
Establishment Telephone	()		
Legal Licensee Name			
Licensee Address	STREET		
	CITY	STATE	ZIP
Licensee Telephone	()		
Email address			
Primary Contact	NAME	PHONE NUMBER	
Secondary Contact	NAME	PHONE NUMBER	
Previous Establishment Name			

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

Food Safety Manager Certification:

Name: _____ **Course:** _____ **Expiration Date:** _____

Food Service (use table on back) A pre-inspection Must Be completed prior to operating <u>Note:</u> Applications & fees must be submitted at least <u>15 days</u> prior to operation or a \$250 late fee may apply.	Fees		
	Pre-Inspection Fees		Annual Permit Fees
	Existing Facility	New Construction	
<input type="checkbox"/> Prepacked TCS Food (Final Product Requires Temperature Control for Safety)	\$69.00	\$124.00	\$69.00
<input type="checkbox"/> Simple Non-TCS (Final Product Does Not Require Temperature Control for Safety)	\$92.00	\$147.00	\$92.00
<input type="checkbox"/> Simple TCS (Final Product Requires Temperature Control for Safety)	\$293.00	\$348.00	\$293.00
<input type="checkbox"/> Moderate	\$408.00	\$463.00	\$408.00
<input type="checkbox"/> Complex	\$1055.00	\$1110.00	\$1055.00
<input type="checkbox"/> Micro Market	N/A	N/A	\$ 44.00
<input type="checkbox"/> Micro Market 2 or more units at location	N/A	N/A	\$ 66.00

Please check all PROCESSING OPERATIONS this establishment will be conducting during the coming license year

<input type="checkbox"/> Bakery	<input type="checkbox"/> Confectionery	<input type="checkbox"/> Ice Cream/Soft Serve	<input type="checkbox"/> Mixing	<input type="checkbox"/> Seafood Department
<input type="checkbox"/> Bottling	<input type="checkbox"/> Deli	<input type="checkbox"/> Ice Making	<input type="checkbox"/> Popping Corn	<input type="checkbox"/> Smoking/Curing
<input type="checkbox"/> Hot/Cold Beverages	<input type="checkbox"/> Freezing	<input type="checkbox"/> Meat Cutting	<input type="checkbox"/> Packing	<input type="checkbox"/> Vacuum Packaging
<input type="checkbox"/> Cooking	<input type="checkbox"/> Grinding	<input type="checkbox"/> Meat Distributor	<input type="checkbox"/> Produce Processing	<input type="checkbox"/> Wild Game
<input type="checkbox"/> Other (Please Specify):				

MISCELLANEOUS:

\$250-Late Fee \$15-Duplicate License \$25-Name Change \$100-Consultation Fee \$100-Plan Review

Water Public Private **Septic** Public Private

Intended Opening Date: ____/____/____ **When will the business be open?** Year Round Winter Summer

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

Retail Food Establishment – Not Serving Meals Complexity Calculation

Use the chart below to calculate your license complexity category.

Table 1: Annual Sales Volume Information- *Check One*

<input type="checkbox"/>	Establishment has annual gross food sale receipts less than \$25,000.	.25
<input type="checkbox"/>	Establishment and has annual gross food sale receipts more than \$25,000 but not more than \$1,000,000.	.5
<input type="checkbox"/>	Establishment has annual gross food sale receipts more than \$1,000,000 but not more than \$5,000,000.	1
<input type="checkbox"/>	Establishment has annual gross food sale receipts more than \$5,000,000.	2

Table 2: Risk Complexity Calculation- *Check All That Apply*

<input type="checkbox"/>	Establishment has a self-service salad bar or food bar. Condiments are not considered a food bar.	1
<input type="checkbox"/>	Establishment processes fresh or frozen raw poultry, meat, seafood, or eggs.	1
<input type="checkbox"/>	Establishment operates using a variance or HACCP plan.	1
<input type="checkbox"/>	Establishment operates using a Bare Hand Contact or Time as a Public Health Control Plan.	1
<input type="checkbox"/>	Establishment offers catering or preordered meals in bulk quantity for events.	1
<input type="checkbox"/>	Establishment cold holds, hot holds, or reheats time/temperature for safety foods.	1
<input type="checkbox"/>	Establishment does cooling of cooked or reheated time/temperature control for safety foods.	1
<input type="checkbox"/>	Establishment wholesales foods that requires refrigeration.	1
<input type="checkbox"/>	Establishment chops, dices, mixes, slices, blanches, boils, cooks, packages, or assembles product.	1
<input type="checkbox"/>	Establishment has an additional area(s), other than the main kitchen, where food preparation activities occur.	1
<input type="checkbox"/>	Establishment prepares food specifically for a highly susceptible population, such as a nursing home or day care.	1
<input type="checkbox"/>	Establishment has a customer seating capacity greater than 75, or has a drive-through window.	1

Calculation Instructions – Add All Points from Table 1 and Table 2 to Determine Retail Food Establishment Complexity

<input type="checkbox"/> 0.25 – 2.25, Simple	<input type="checkbox"/> 2.5 – 4.5, Moderate	<input type="checkbox"/> Greater than 4.5, Complex
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Please review Wis. Admin. Code § ATCP 75.08 for specific rule language regarding complexity category assignment.

PLEASE READ CAREFULLY BEFORE SIGNING

Information requested on this application must be provided to obtain a permit. Operating without a permit is a violation of Wisconsin Law. Permits are not transferable between persons or locations, except to an immediate family member. **Permits are valid July 1 – June 30 the following year.** Permit fees are not prorated for partial license years. Pierce County Public Health Department may inspect premises at any reasonable time. Missing information may delay the issuance of your permit. You are not permitted to operate until Pierce County Public Health Department conducts an inspection. The undersigned hereby certifies that this is a true, complete and accurate application for the establishment permit under Wis. Stat. 97.30.

*All facilities shall have an inspection annually.

*Note: Permit renewal payments not received by **July 15th** will be charged a **\$250** late fee.

SIGNATURE OF LICENSEE OR AGENT

TITLE

DATE

