




847-931-5920 

publichealth@cityofelgin.org 

www.cityofelgin.org/business 

150 Dexter Court, Elgin, IL, 60120 

# SEASONAL FOOD ESTABLISHMENT APPLICATION

*Seasonal Temporary Events will include multiple temporary events within the City of Elgin. A temporary event not listed as an approved event will require a separate temporary permit.*

## WHAT YOU SHOULD KNOW

- ▶ If you have a Kane County Health Department seasonal food license, you do not need to complete this application; simply submit a copy of it to our Community Development office.
- ▶ Complete this permit if you do not have a Kane County Health Department seasonal food license and your event or events will last longer than 2 weeks. If your event is 2 weeks or less, complete the Temporary Food application.
- ▶ New applications for seasonal food handling must be submitted each year.
- ▶ A City of Elgin inspection needs to occur before or at your first event. Contact 311 to set up the inspection.
- ▶ Submittal of an application does not guarantee approval.
- ▶ Permits are not transferable to another person or event that is not listed on this application.
- ▶ Mechanical refrigeration is required for cold food.
- ▶ After your completed application is submitted, you will be contacted by city staff in 3-5 business days.
- ▶ If you have questions or need help completing this application, visit the website [www.cityofelgin.org/permits](http://www.cityofelgin.org/permits) or call 311.

## OWNER CONTACT INFORMATION

*This information is about the organization owner. The information and address listed should be where the owner conducts business.*

OWNER'S NAME

OWNER'S MAILING ADDRESS

OWNER'S PHONE NUMBER

OWNER'S EMAIL ADDRESS

## ESTABLISHMENT CONTACT INFORMATION

\_\_\_\_\_  
BUSINESS NAME

\_\_\_\_\_  
BUSINESS PHONE

\_\_\_\_\_  
BUSINESS ADDRESS

\_\_\_\_\_  
BUSINESS EMAIL ADDRESS

\_\_\_\_\_  
MAILING ADDRESS

\_\_\_\_\_  
SALES TAX ID

## ESTABLISHMENT DETAILS

\_\_\_\_\_  
ESTABLISHMENT CLASSIFICATION (SEE FINAL PAGE)

\_\_\_\_\_  
ANTICIPATED MONTHS

\_\_\_\_\_  
NAME OF CERTIFIED FOOD HANDLER

\_\_\_\_\_  
POSITION

\_\_\_\_\_  
CERTIFIED FOOD HANDLER I.D. #

\_\_\_\_\_  
CERTIFIED FOOD HANDLER I.D. EXPIRATION DATE

TYPE OF PERMIT  New

Renewal

FOOD TYPE  Hot

Cold

Pre-packaged

METHOD OF HAND  
HAND WASHING  Hand sink  
 Dispensed soap  
 Paper towels

Spiggoted thermos  
with catch bucket

METHOD OF  
COOKING/HOT  
HOLD WG  Grill  
 Fryers  
 Warming Boxes/  
Electric

Crock Pot  
 Steam Table  
 Other (*explain*) \_\_\_\_\_

PREPARATION SITE  On-site

Approved restaurant  
(Name) \_\_\_\_\_



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## VENDOR CLASSIFICATIONS

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*The City of Elgin will determine your classification based on the information you provide on this application. Category 3 is the most common category for seasonal food handling.*

### Category 3 - \$410

Has few food handling operations and includes facilities that routinely:

- 1) Hold hot or cold food for use that day, or
- 2) Prepare menu items that require minimal handling, or
- 3) Menu items requiring complex preparation are prepared from canned, frozen, or fresh-prepared foods to limit handling.

### Category 4 - \$270

Have a few or no food handling operations and include facilities that include facilities that routinely:

- 1) Serve only pre-packaged foods
- 2) Prepare and serve non-potentially hazardous food such as snack foods or soda, or
- 3) Serve only non-alcoholic or alcoholic beverages

*\*For individuals who may not attend all dates of an event series:*

- 1) Temporary food service establishments fee charged per event \$145.00 food prep of potentially hazardous food (PHF) \$145 prepackaged PHF/sampling. (Annual vendor qualifications apply).

By signing below, I affirm that the above information is true to the best of my knowledge and

\_\_\_\_\_  
PERSON COMPLETING APPLICATION

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

*City staff will contact you after receiving your completed application and advise you on the next steps. For assistance in completing this application, please call 311.*