

Permit: \$ _____ Category: _____ Approved by: _____

Route Sheet

CHANGES TO THE ROUTE LISTED BELOW MUST BE SUBMITTED TO THE HEALTH DEPARTMENT

[illegible]

VENDOR CLASSIFICATIONS

CATEGORY II - \$590.00 (Certified Food Protection Manager Required at all times)

(Seasonal - less than 6 months pay \$528.00)

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 III - \$530.00

(Seasonal - less than 6 months pay \$355.00)

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

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

Proof of approved sources must accompany permit application in the form of a copy of a current inspection from a recognized health agency for commissaries located outside of Kane County.

Applications for new annual mobile units submitted after July 1 pay half the appropriate fee

[illegible]

I AFFIRM THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF

Date: _____ Signature: _____

THIS PERMIT IS NOT TRANSFERABLE TO ANOTHER PERSON OR MOBILE VENDING UNIT

[illegible]

Adopted 12/02
Reviewed 11/03
Revised 10/25