

www.kanehealth.com

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2026 Application for Seasonal Food Handling Permit

As prescribed in Article II, Section C, Kane County Sanitation Ordinance, the undersigned hereby makes application for a permit to operate a food establishment in the County of Kane. Seasonal Temporary Events will include multiple temporary events within Kane County.

Name of Business: Owner: Address:		Phone #:		
		Fax #:		
		City:	State:Zip:	
Email:				
Food: [] Hot	[] Cold [] Pre-packaged	Type of Permit	: [] New	[] Renewal
Establishment Cla	ssification (see reverse):	_ Anticipated Months:		
Food Served:				
Food Source:				
Certified Food Protection Manager:		Position:		
Identification Number:		Expiration Date:		
	apply) *** MECHANICAL REFI			
	[] Off-ground [] Sneeze Shield [] Grill [] Steam table/E [] Fryers [] Crock Pot	lectric [] Steam table/Ste		
Environmental Protection:	[] Tent [] Trailer [] Pre-packaged [] Individe	[] Umbrella ually wrapped		ntainers
Handwashing:	[] Public [] Private [] Hand sink [] Dispen [] Spiggoted thermos with catch be	nsed soap [
	[] Extra utensils [] 3 comp	partment sink [
-FOR OFFICE USE O				
	Issuance Number: Spproved by:			

Events listed below will be the only events approved for this permit. ADDITIONAL BOOTHS WILL REQUIRE A SEPARATE TEMPORARY PERMIT TO BE ISSUED

	Event Name(s)	Event Location	Event Date			
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			<u> </u>			
		VENDOR CLASSIFICATIONS				
	ATEGORY II - \$513.00 (Certified For section is few food handling operations and	ood Protection Manager Required at all includes facilities that routinely:	times)			
1)	hold hot or cold food for use that d					
2) 3)	, i i					
	ATEGORY III - \$338.00 ave few or no food handling operatio	ns and include facilities that routinely:				
2)	 serve only pre-packaged foods, or prepare and serve only non-potentially hazardous food such as snack foods or soda, or serve only non-alcoholic or alcoholic beverages. 					
XX	xxxxxxxxxxxxxxxxxxxxxx	xxxxxxxxxxxxxxxxxxxxxxxxx	xxxxxxxxxxxxxxxxxxxxxx			
	I AFFIRM THAT THE ABOVE INF	ORMATION IS TRUE TO THE BEST OF MY K	NOWLEDGE AND BELIEF			
D	ate:	Signature:				

REVISED 10/25