



PUBLIC HEALTH IS PRICELESS

VERMILION COUNTY HEALTH DEPARTMENT

HEALTH AND EDUCATION BUILDING
200 SOUTH COLLEGE STREET, SUITE A
DANVILLE, IL 61832
PHONE/TDD 217 431-2662
FAX 217 431-7483
www.vchd.org

TEMPORARY FOOD SERVICE PERMIT APPLICATION

NAME OF FOOD STAND: _____

OWNER'S (OPERATOR'S) NAME: _____ PHONE: _____

OWNER'S ADDRESS: _____ 24HR PHONE: _____

If sponsored by a church, organization, fraternal, or community group, list contact person and contact phone phone number of those sponsoring you _____

1ST EVENT NAME: _____

EVENT LOCATION: _____
(location name, address, city)

DATE & TIME OF SET UP: _____

DATE & HOURS OF OPERATION: _____

MENU ITEMS: _____

APPLICANT'S SIGNATURE: _____ DATE: _____
(Signature is required for a permit to be issued.)

PERMIT CLASSIFICATION

- ___ CLASS 3A – A single event which lasts no longer than a 14-day duration in one location. **FEE \$50**
- ___ CLASS 3B – Food stand operator attending multiple events throughout the calendar year. Please list additional events on back. **FEE \$50.00 for the first event, plus \$15 for each additional event.**
- ___ CLASS 3C – Charity Temporary Food Service Permits are for the organizations that request donations without specifying a cost or serve food free of charge. A permit and inspection are required but there is no charge for the permit. **NO FEE**

Temporary Food Service Permits are required for all temporary food service operations which must operate in conjunction with special events open to the public. This includes, but is not limited to, fairs, auctions, special church events, fraternal fund raisers, and special community service events where FOOD IS SERVED TO THE GENERAL PUBLIC. Not included are private homes or closed invitation only events such as reunions, wedding receptions, church, or fraternal dinners for members only and private parties. School sponsored dinners, prepared at the school, do not require a permit or inspection.

RETURN APPLICATION AND NON-REFUNDABLE FEE TO THE VERMILION COUNTY HEALTH DEPARTMENT,
200 S. COLLEGE AVE., DANVILLE, IL 61832. (Please make checks payable to the Vermilion County Health Department)

Additional events can be added on second page.



AN EQUAL OPPORTUNITY EMPLOYER

Additional Temporary Events

Fee is \$50.00 for the first event plus \$15.00 for each additional event

TOTAL COST

\$65 **2ND EVENT NAME:** _____ **DATE:** _____
LOCATION: _____
MENU ITEMS: _____
APPLICANT'S SIGNATURE: _____

\$80 **3RD EVENT NAME:** _____ **DATE:** _____
LOCATION: _____
MENU ITEMS: _____
APPLICANT'S SIGNATURE: _____

\$95 **4TH EVENT NAME:** _____ **DATE:** _____
LOCATION: _____
MENU ITEMS: _____
APPLICANT'S SIGNATURE: _____

\$110 **5TH EVENT NAME:** _____ **DATE:** _____
LOCATION: _____
MENU ITEMS: _____
APPLICANT'S SIGNATURE: _____

\$125 **6TH EVENT NAME:** _____ **DATE:** _____
LOCATION: _____
MENU ITEMS: _____
APPLICANT'S SIGNATURE: _____

\$140 **7TH EVENT NAME:** _____ **DATE:** _____
LOCATION: _____
MENU ITEMS: _____
APPLICANT'S SIGNATURE: _____

\$155 **8TH EVENT NAME:** _____ **DATE:** _____
LOCATION: _____
MENU ITEMS: _____
APPLICANT'S SIGNATURE: _____