




847-931-5920 

publichealth@cityofelgin.org 

www.cityofelgin.org/business 

150 Dexter Court, Elgin, IL, 60120 

# FOOD ESTABLISHMENT APPLICATION

## WHAT YOU SHOULD KNOW

- ▶ The business owner should complete this application.
- ▶ This application is usually submitted following your Occupancy Permit issuance. If you don't have your Occupancy Permit yet, complete the Business Application before completing this application in order to get your Occupancy Permit.
- ▶ For new and extensively remodeled food establishments a Food Establishment Plan Review Packet must be submitted.
- ▶ There are no additional inspections required for this permit application.
- ▶ Submittal of an application does not guarantee approval.
- ▶ Additional documentation and fees may be required.
- ▶ After your completed application is submitted, you will be contacted by city staff to discuss further.
- ▶ If you have questions or need help completing this application, visit the website [www.cityofelgin.org/business](http://www.cityofelgin.org/business) or call 311.

## BUSINESS CONTACT INFORMATION

*This will be our city staff's contact person for this permit application*

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

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

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

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

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

\_\_\_\_\_  
WEBSITE

# BILLING STATEMENT CONTACT INFORMATION

*This will be our city staff's contact person for billing statement information*

\_\_\_\_\_  
BUSINESS OWNER'S FULL NAME

\_\_\_\_\_  
BUSINESS OWNER'S ADDRESS

\_\_\_\_\_  
BUSINESS OWNER'S PHONE NUMBER

\_\_\_\_\_  
BUSINESS OWNER'S EMAIL ADDRESS

## BUSINESS DETAILS

\_\_\_\_\_  
SEATING CAPACITY

\_\_\_\_\_  
BUSINESS SQUARE FEET

\_\_\_\_\_  
BUSINESS HOURS *(Example: 9a-5p M-F)*

\_\_\_\_\_  
DAYS CLOSED

\_\_\_\_\_  
NUMBER OF EMPLOYEES

\_\_\_\_\_  
PEST CONTROL COMPANY

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

\_\_\_\_\_  
POSITION

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

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

\_\_\_\_\_  
GREASE TRAP DISPOSAL BY:

\_\_\_\_\_  
GREASE BARREL DISPOSAL BY:

TYPE OF PERMIT     New     Renewal

TYPE OF OWNER     Individual     Partnership     Corporation     Local

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

\_\_\_\_\_  
TITLE OF APPLICANT

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

\_\_\_\_\_  
DATE

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## L I C E N S E   A N N U A L   F E E S

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*The Kane County Board of Health determines your business's category.*

### Category 1 Facility - \$965

Examples of category 1 facilities would include but are not limited to large (greater than 15,000 square feet), multi-department retail grocery stores which may include delicatessen, bakery, meat/seafood, produce and food service.

### Category 2 Facility - \$755

Examples of category 2 facilities would include but are not limited to full restaurants, caterers, hospitals, small (less than 15,000 square feet) grocery stores, daycares/preschools providing a full service meal.

### Category 3 Facility - \$650

Examples of category 3 facilities would include but are not limited to fast food restaurants, and daycares/preschools may provide potentially hazardous packaged or catered food that must be kept hot or cold.

### Category 4 Facility - \$570

Examples of category 4 facilities would include but are not limited to retail outlets selling only prepackaged food, movie theaters with popcorn and soda, bars that do not prepare potentially hazardous food, and daycares/preschools that serve limited potentially hazardous foods such as milk or non-potentially hazardous snacks

Establishments opening or changing ownership prior to July 1 will pay one hundred percent (100%) of the appropriate annual fee. Establishments opening or changing ownership July 1 or after will pay fifty percent (50%) of the annual fee for the remainder of the calendar year. Establishments opening or changing ownership October 1 or after will pay twenty-five percent (25%) of the annual fee for the remainder of the calendar year.

Charitable non-profit organizations including daycares may petition to pay up 50% of their fee.

*As prescribed in section 9.08 of the ELGIN MUNICIPAL CODE, the undersigned hereby makes application for a permit to operate a food service establishment in the city of Elgin.*