

Dunn County Health Department

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PLEASE TYPE OR PRINT
 Submit check payable to
 Dunn Co. Health Dept. with
original copy of application
 to address at left.

RETAIL FOOD ESTABLISHMENT LICENSE APPLICATION

THIS APPLICATION PERTAINS ONLY TO THE FOLLOWING BUSINESS LOCATION & OPERATOR:

(CHECK ONE): *Individual *Partnership *General Partnership LP LLP LLC Corp. Coop.

LEGAL NAME OF APPLICANT (Legal Licensee)			FACILITY NAME (d/b/a)		
LICENSEE ADDRESS			FACILITY ADDRESS		
LICENSEE CITY	STATE	ZIP CODE	FACILITY CITY	STATE	ZIP CODE
BILLING CONTACT		BILLING CONTACT PHONE	NAME OF FACILITY CONTACT		TITLE
LICENSEE PHONE NUMBER		E-MAIL (if available)	FACILITY PHONE NUMBER		E-MAIL (if available)
DATE YOU WISH TO OPEN			NUMBER OF SEATS		

• **INDICATE BUSINESS DESCRIPTION (Check only one box, A or B) See "DEFINITIONS" and "FEE SCHEDULES" on back**

<p>(A) <input type="checkbox"/> PROCESSING FOOD AT RETAIL. 1. Do you intend to process potentially hazardous foods? <input type="checkbox"/> YES <input type="checkbox"/> NO 2. Dollar volume. Enter total gross retail food sales at this location during the last 12 months (if not operating, estimate sales for 12 months). \$ _____</p>	<p>(B) <input type="checkbox"/> DOES NOT ENGAGE IN PROCESSING Sales of only pre-packaged, potentially hazardous foods Food which requires cooling or freezing.</p>
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• **INDICATE LICENSE CATEGORY AND FEE FROM FEE SCHEDULE INDICATE TYPE OF ESTABLISHMENT (check one)**

Check box that applies:

PreInspec Fee	Annual Fee	State Fee	License Description
<input type="checkbox"/> \$60	<input type="checkbox"/> \$88	<input type="checkbox"/> \$10.50	DOES NOT ENGAGE IN PROCESSING
<input type="checkbox"/> \$80	<input type="checkbox"/> \$121	<input type="checkbox"/> \$10.50	Food Sales under \$25,000 and processes potentially haz. food
<input type="checkbox"/> \$80	<input type="checkbox"/> \$121	<input type="checkbox"/> \$10.50	Food Sales under \$25,000 and processes non-potentially haz. food
<input type="checkbox"/> \$150	<input type="checkbox"/> \$247.50	<input type="checkbox"/> \$23	Food Sales > \$25,000 and processes non-potentially haz. food
<input type="checkbox"/> \$250	<input type="checkbox"/> \$385	<input type="checkbox"/> \$30	Food Sales \$25,000-\$1,000,000 and processes potentially haz. food
<input type="checkbox"/> \$350	<input type="checkbox"/> \$880	<input type="checkbox"/> \$54	Food Sales > \$1,000,000 and processes potentially haz. food

NOTE: Both the PI Fee and Annual Fee are due before opening

AUTHORIZED SIGNATURE	Position or Title	DATE
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SHADED AREA FOR DEPARTMENT USE ONLY

Please check all PROCESSING OPERATIONS this establishment will be conducting during the coming license year:

<input type="checkbox"/> BK Bakery	<input type="checkbox"/> DL Delicatessen	<input type="checkbox"/> MD Meat Distributor	<input type="checkbox"/> SD Seafood Dept.
<input type="checkbox"/> BO Bottling	<input type="checkbox"/> FR Freezing	<input type="checkbox"/> MX Mixing	<input type="checkbox"/> SE Shell Egg Packaging
<input type="checkbox"/> BV Hot/Cold Beverages	<input type="checkbox"/> GR Grinding	<input type="checkbox"/> PC Popping Corn	<input type="checkbox"/> SM Smoking/Curing
<input type="checkbox"/> CK Cooking	<input type="checkbox"/> IC Ice Cream/Soft Serve	<input type="checkbox"/> PK Packing	<input type="checkbox"/> SV Salvage
<input type="checkbox"/> CT Catering	<input type="checkbox"/> IM Ice Making	<input type="checkbox"/> PP Produce Processing	<input type="checkbox"/> VP Vacuum Packaging
<input type="checkbox"/> CY Confectionery	<input type="checkbox"/> MC Meat Cutting	<input type="checkbox"/> RT Restaurant.	<input type="checkbox"/> WG Wild Game
			<input type="checkbox"/> Other

PI Fee = _____ + Annual Fee = _____ + 10% State Fee = _____

****Total Due = _____**