

# 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.

Rev. 6/18

## 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)

<p><b>(A)</b>  <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>(B)</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 (check one)

(Check box that applies) **Both the Pre-Inspection Fee and Annual Fee are due before opening**

	<u>Pre-Inspect</u>	<u>Annual</u>	<u>License Description</u>
<input type="checkbox"/>	<b>\$90</b>	<b>\$105</b>	DOES NOT ENGAGE IN PROCESSING
<input type="checkbox"/>	<b>\$90</b>	<b>\$140</b>	Very small – Processes potentially hazardous food. Food sales under \$25,000
<input type="checkbox"/>	<b>\$190</b>	<b>\$500</b>	Small- Processes potentially hazardous food. Food sales \$25,000-\$1,000,000
<input type="checkbox"/>	<b>\$450</b>	<b>\$1040</b>	Large- Processes potentially hazardous food. Food sales over \$1,000,000
<input type="checkbox"/>	<b>\$90</b>	<b>\$140</b>	Very small – Processes <i>non-potentially</i> hazardous food. Food sales under \$25,000
<input type="checkbox"/>	<b>\$190</b>	<b>\$300</b>	Large – Processes <i>non-potentially</i> hazardous food. Food sales over \$25,000
<input type="checkbox"/>	No fee	<b>\$44</b>	Micro Market – Single unit
<input type="checkbox"/>	No fee	<b>\$66</b>	Micro Market – Multiple units, same location

Print Name: _____	AUTHORIZED SIGNATURE: _____	Date: _____
Position or Title: _____		

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

Pre-Inspection Fee \_\_\_\_\_ + Annual Fee \_\_\_\_\_ = Total Due \_\_\_\_\_