



**Chippewa County**  
**Department of Public Health**

711 N Bridge Street, Room 121  
Chippewa Falls, WI 54729  
P: 715.726.7900 / 1.800.400.3678  
F: 715.726.7910  
[www.co.chippewa.wi.us/ccdph](http://www.co.chippewa.wi.us/ccdph)



**LICENSE APPLICATION -Transient Retail Food Establishment**

<b>ESTABLISHMENT/DBA INFORMATION:</b>			
ESTABLISHMENT NAME:		COUNTY:	
SERVICE BASE STREET ADDRESS:(If applicable)		CITY:	STATE: ZIP:
EMAIL ADDRESS:		ESTABLISHMENT PHONE: (     )     -	

<b>LEGAL ENTITY INFORMATION – CHECK ONE</b>			
<input type="checkbox"/> Individual	<input type="checkbox"/> Married Couple	<input type="checkbox"/> Limited Liability Company (LLC)	<input type="checkbox"/> Limited Liability Partnership (LLP) <input type="checkbox"/> Corporation
<input type="checkbox"/> Cooperative	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Partnership (LP)	In what state is your entity registered?
LEGAL ENTITY (such as name of sole proprietor, partnership, LLC, LLP, or Inc.):		COUNTY:	
LEGAL ENTITY MAILING ADDRESS:		CITY:	STATE: ZIP:
EMAIL ADDRESS:		LEGAL ENTITY PHONE: (     )     -	

<b>CONTACT INFORMATION</b>			
CONTACT PERSON:	TITLE:	PHONE: (     )     -	EMAIL ADDRESS:
Out of State Operators – If known, list first Wisconsin city/county of operation:			

<b>Events you plan to operate:</b>
<input type="checkbox"/> Spring Fest <input type="checkbox"/> Indianhead Swap Meet <input type="checkbox"/> Country Fest <input type="checkbox"/> Rock Fest <input type="checkbox"/> Northern Wisconsin State Fair <input type="checkbox"/> Oktoberfest <input type="checkbox"/> Northwood's Blues Festival <input type="checkbox"/> Big Rig Truck Show <input type="checkbox"/> Pure Water Days <input type="checkbox"/> One Fest <input type="checkbox"/> Local Community Fair _____ <input type="checkbox"/> Other Event(s) _____

<b>Before Completing this application, read Temporary Foodservice Guidelines</b> <b>Guidelines available here: <a href="https://datcp.wi.gov/Pages/Programs_Services/FoodCodeFactSheets.aspx">DATCP Home Food Code Fact Sheets</a></b> <b><a href="https://datcp.wi.gov/Pages/Programs_Services/FoodCodeFactSheets.aspx">https://datcp.wi.gov/Pages/Programs_Services/FoodCodeFactSheets.aspx</a></b>
Have you read this material? <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>Menu: Please list all items you intend to serve</b>

**Will all foods be prepared on-site at the event?**

☐ Yes   ☐ No

Note: If food is not prepared on-site please indicate the licensed food establishment where the food will be prepared. Provide a copy of the establishment's license or list the Name, Address, and License ID # of the establishment where food preparation will occur.

Establishment Name: \_\_\_\_\_

Establishment Address:

Establishment License ID #:

**Please Describe:**

Source and storage of water:

Storage and disposal of wastewater:

Storage and disposal of garbage:

**Draw a sketch of the proposed food booth in the space below or on a separate piece of paper and attach to the application. Include location and identify all equipment including handwashing, dishwashing, cooking equipment, refrigerators, worktables, food/single service storage, etc.**

<b>LICENSE FEES:</b>	
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<input type="checkbox"/> Transient Retail Food Establishment – TCS	LICENSE FEE: \$240 Per Food Stand
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**LICENSE FEE: \$240 Per Food Stand**

☐ **Transient Retail Food Establishment – Non-TCS**      **LICENSE FEE: \$140 Per Food Stand**

**LICENSE FEE: \$140 Per Food Stand**

☐ **Transient Retail Food Establishment – Prepackaged**    **LICENSE FEE: \$60 Per Food Stand**

**LICENSE FEE: \$60 Per Food Stand**

TOTAL AMOUNT PAID:

***Please read carefully before signing***

Information requested on this application must be provided to obtain a retail food establishment license. Personal information you provide may be used for purposes other than that for which it was originally collected (Wis. Stat. § 15.04(1) (m)). Operating without a license is a violation of Wisconsin Law. Licenses are not transferable between persons or locations. Licenses expire annually on June 30; unless issued after April 1, which will expire on June 30th of the following year. The license fee is not prorated for partial license years. The Department may inspect premises at any reasonable time. Missing information may delay the issuance of your license. You are not licensed to operate until the department conducts an inspection. The undersigned hereby certifies that this is a true, complete and accurate application for the Retail Food Establishment license under Wis. Stat. § 97.30.

Within 30 days after receiving a complete application for a license, the department shall either approve the application and issue a license or deny the application. If the application for a license is denied, the department shall give the applicant reasons, in writing, for the denial.

SIGNATURE – APPLICANT: \_\_\_\_\_ DATE SIGNED: \_\_\_\_\_

DATE SIGNED: \_\_\_\_\_