

2011

Category F6

Establishment# \_\_\_\_\_

(Official Use Only)

**ST. CLAIR COUNTY HEALTH DEPARTMENT**  
**Environmental Health Division**  
**19 Public Square, Suite 150**  
**Belleville, IL 62220**  
**Ph: 618 233.7769 Fax: 618 236.0676**

**FOOD SERVICE SANITATION PERMIT APPLICATION**

St. Clair County Food Ordinance 19-4 requires any person operating a food service establishment or retail food store to possess a valid permit issued by the St. Clair County Health Department.

**Instructions:** Please complete this form and return it or fax it at (618) 236-0676 to the St. Clair County Health Department by **January 31, 2011.** **No Fee is required for this application.**

Name of Establishment \_\_\_\_\_ Ownership: (Check one)  
Individual \_\_\_\_\_  
Address of Business \_\_\_\_\_ Partnership \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Corporation \_\_\_\_\_  
Non-Profit \_\_\_\_\_  
(If non-profit, include tax exempt number) \_\_\_\_\_

Owner/Licensee \_\_\_\_\_ Corporate Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Emergency Phone \_\_\_\_\_ Fax Number \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Mail future application to:  Establishment Address  Corporate Address

***Are Alcohol Beverages sold at Establishment yes or no***

**CATEGORIES: Please Circle One**

- |                                  |                   |                      |
|----------------------------------|-------------------|----------------------|
| Adult Day Care _____# of patrons | Elementary School | Senior Center        |
| Child Day Care                   | Middle School     | Special Needs School |
| Nursing Home _____# of patrons   | High School       | Hospital             |
| Sports Center                    | Colleges          | Food Pantry          |
| Veterans/American Legion         | Church            | Other Explain _____  |

I affirm the above information is true to the best of my knowledge and belief.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**PERMITS ISSUED TO A FACILITY ARE NOT TRANSFERABLE.**  
**ALL PERMITS EXPIRE DECEMBER 31<sup>ST</sup> OF EACH CALENDAR YEAR.**