



**Adams County Health Department**  
330 Vermont ST • Quincy, IL • 62301  
217-222-8440 • environmental@adamscountyil.gov

## **APPLICATION FOR TEMPORARY FOOD STAND PERMIT**

(Version 20240301)

### **Contact Information:**

Name of Food Stand: \_\_\_\_\_

Licensee/Owner: \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_

Owner Email Address: \_\_\_\_\_

Owner Phone Number: \_\_\_\_\_

Onsite Person in Charge (if different from owner): \_\_\_\_\_

Onsite Person in Charge Cell Phone: \_\_\_\_\_

### **Event Information:**

Name of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_ Serving Time at the Event: \_\_\_\_\_

Time you will be ready for operation/inspection: \_\_\_\_\_

Is this a large event with multiple vendors:  Yes  No Event Contact: \_\_\_\_\_

### **Food:**

List all foods & beverages being served: \_\_\_\_\_

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**Fees:** (NOTE: Fees have changed as of March 1, 2024. There is no longer an annual fee for temporary food permits.)

All fees are due with the submission of your application. An additional late fee of \$25 will be assessed to any application not received at least two business days prior to the event.

- 1-3 Day Event: \$50     4-7 Day Event: \$75     8-14 Day Event: \$100
- Farmers' Market Location: \$100 (one permit per location per year)
- No Fee--TAX EXEMPT (Churches, Schools, Government Agencies, and Charitable Organizations registered under Section 501(c)(3) of the IRS Code). If tax exempt, include tax exempt ID number: \_\_\_\_\_

**Agreements:**

**Checkmark each of the statements below indicating that you understand and will abide by them.**

<input type="checkbox"/>	I will prepare all food on-site or at a licensed food establishment. No foods prepared from home are allowed.
<input type="checkbox"/>	I will provide a handwashing station with warm water, soap, and paper towels PRIOR to any food preparation, and I will maintain it supplied throughout the event. A temporary handwashing station must have a hands free on/off valve and a wastewater catch container.
<input type="checkbox"/>	I will ensure that all cold foods will be held at 41°F or below at all times, including during transportation.
<input type="checkbox"/>	I will ensure that all hot foods will be held at 135°F or above at all times, including transportation. Hot-holding devices must be capable of holding foods hot for extended periods of time. The use of insulated boxes for hot holding other than during transportation and the use of chafing dishes for hot holding outside are prohibited.
<input type="checkbox"/>	I will provide cooking devices that rapidly cook/reheat food. (steam tables, heat lamps, and crockpots are not designed to rapidly cook or reheat foods).
<input type="checkbox"/>	I have and will use a probe thermometer for checking internal food temperatures.
<input type="checkbox"/>	All food preparation and serving areas will be protected from overhead contamination (Tent, trailer, pop-up, etc.)
<input type="checkbox"/>	I will provide a covered wash, rinse, sanitize three compartment sink set up for the cleaning of utensils and equipment. A spray bottle of sanitizer must be provided for surfaces like tables and countertops. Appropriate test strips for the sanitizer must be available.
<input type="checkbox"/>	I understand that this application must be submitted, with fees, at least two (2) business days prior to the event or a \$25 late fee will be assessed.
<input type="checkbox"/>	I will display my permit at the event in a manner that is viewable by the public.

**Application is hereby made for a Temporary Food Stand Permit to operate. By this application, it is agreed that the establishment will comply with the provisions of the Adams County Retail Food Ordinance applicable to this type of food handling establishment. It is further agreed that said food service establishment shall be open to inspection by the Adams County Health Department.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Office Use Only:** Payment Amt \$ \_\_\_\_\_  Cash  Credit  Check # \_\_\_\_\_ Payment Rec'd by \_\_\_\_\_  
Permit # \_\_\_\_\_ Application Reviewed By \_\_\_\_\_ Date Reviewed \_\_\_\_\_