Transient Retail Food License Application

OFFICE USE ONLY: Record ID#: LICTFD: _

Apply and pay online at <u>City of Madison Licenses & Permits</u>.

Or submit this application	and payment by mail o	or in person to:	OFFICE USE ONLY: Record ID#: LICTFD:					
• •	Madison City Clerk's Office:							
· · · · · · · · · · · · · · · · · · ·	210 Martin Luther King Jr. Blvd., Room 103, Madison, WI 53703							
Make checks payable to C	ity of Madison Treasur	er.						
For questions, to get help	-		uage, or to contact a sar	itarian,				
call Environmental Heath		_	_	•				
A. BUSINESS/ORGA	NIZATION INFORM	MATION						
NAME/DBA:								
STREET ADDRESS:	STREET ADDRESS:		CITY, STATE, ZIP:					
D OFF CITE VITOUEN	\I							
B. OFF-SITE KITCHEN								
IMPORTANT: If any food in advance for the off-sit	_	_		tional Retail	Food License must be of	otained		
Visit Retail Food and Drink Licensing for application, fee schedule, and requirements								
ARE YOU USING AN OFF-	RE YOU USING AN OFF-SITE KITCHEN?							
□ Yes			Off-site kitchen addre	ss:				
☐ No – all activity done	e onsite at event							
NON-PROFIT ORGANIZATIONS: Are allowed 3 fee-exempt days per calendar year for serving or selling meals, and 12 fee-exempt days per year for serving or selling non-meal foods. If exceeding fee exempt days, licensing and payment apply, including Retail Food Licensing if using an off-site commercial kitchen.								
including Retail F	ood Licensing if using	an off-site commer	cial kitchen.					
including Retail F		an off-site commer	cial kitchen.					
-	ON INFORMATION	PHONE:	cial kitchen.	EMAIL:				
C. CONTACT PERSO	ON INFORMATION		cial kitchen.	EMAIL:				
C. CONTACT PERSO	ON INFORMATION		cial kitchen.	EMAIL:				
C. CONTACT PERSONAME: D. LICENSE FEE TABLE Time/Temperature Cont	ON INFORMATION F LE rol for Safety Foods (TO	PHONE:			r safety. Examples are co	old		
C. CONTACT PERSONAME: D. LICENSE FEE TABLE Time/Temperature Cont holding and/or hot holding	DN INFORMATION F LE rol for Safety Foods (TOing.	PHONE: CS) are final products	that require temperatu	re control fo		old		
C. CONTACT PERSONAME: D. LICENSE FEE TABLE Time/Temperature Cont holding and/or hot holding Pre-packaged means independent of the contact of	DN INFORMATION F LE rol for Safety Foods (TOing. lividually packaged at o	PHONE: CS) are final products off-site licensed facilit	that require temperatu y and sold to consumer	re control fo	er.	old		
C. CONTACT PERSONAME: D. LICENSE FEE TABLE Time/Temperature Cont holding and/or hot holding Pre-packaged means ind Licenses expire June 30 cm.	DN INFORMATION F LE rol for Safety Foods (Toing. lividually packaged at ool of each year. Licenses is	PHONE: CS) are final products off-site licensed facilit ssued between April	that require temperatu y and sold to consumer 1 and June 30 will expire	re control fo in this mann e on June 30	er. of the following year.	old		
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Solicitud de Licencia Transitoria para Venta Directa de Alimentos al Cliente

Solicite y pague en línea en <u>Licencias y Permisos de la Ciudad de</u> Madison o envíe esta solicitud y el pago por correo o en persona a: OFFICE USE ONLY: Record ID#: LICTFD:								
Madison City Clerk's Office:								
210 Martin Luther King Jr. Blvd., Room 103, Ma Haga los cheques pagaderos a "City of Madison	·							
Esta licencia no es renovable y debe llenar una :		iene nreguntas, necesita	a avuda nara llenar la solic	ritud en otro idioma				
desea comunicarse con nosotros, llame al Depa								
A. INFORMACIÓN DE LA EMPRESA/O	ORGANIZACIÓN PROPERTIES							
NOMBRE/HACIENDO NEGOCIO COMO:								
DIRECCIÓN:		CIUDAD, ESTADO, ZIP:						
ORGANIZACIONES SIN FINES DE LUCR y 12 días exentos de pago por año par tarifa, se aplicarán licencias y pagos, in	a servir o vender alime	entos que no sean comi	das. Si se exceden los días	exentos de				
B. COCINA SATÉLITE								
IMPORTANTE: Si se va a preparar comida o lavar platos en una cocina satélite, se debe obtener una licencia de venta minorista de alimentos adicional por adelantado para la cocina satélite comercial, si aún no tiene licencia. Visite licencias para establecimientos de venta directa de alimentos al cliente para obtener la solicitud, el programa de tarifas y los requisitos								
¿ESTÁ UTILIZANDO UNA COCINA SATÉLITE? Si No – toda la actividad se realizara durante	Dirección de la cocina satélite:							
C. INFORMACIÓN DE LA PERSONA I	DE CONTACTO							
NOMBRE:	TELEFONO:		CORREO ELECTRÓNICO:					
D. TABLA DE TARIFAS DE LICENCIA								
El "Control de Tiempo/Temperatura para la Segur requieren un control de temperatura para su segu "Pre-empacado" se refiere a productos empacado esta manera. Las licencias vencen el 30 de junio de cada año. La siguiente. Los puestos múltiples que operan simu	uridad. Algunos ejemplos os individualmente en ins as licencias expedidas ent	son el mantenimiento en stalaciones autorizadas fue tre el 1 de abril y el 30 de j	frío y/o el mantenimiento er era del evento y vendidos al c unio vencerán el 30 de junio	n caliente. consumidor de del año				
Tine de Camide	Tos	No TCC	. Due comme	and a TCC				
Tipo de Comida	TCS	No-TCS	-					
Tarifa (Por favor, marque solo una casilla)	□ \$130.0	00	0.00				
E. CONSENTIMIENTO Y FIRMA								
☐ He leído los <u>Puntos Clave de los puestos de</u> Pública) y me comprometo a cumplir con e Entiendo que las violaciones al Código de A	todos los requisitos. Yo	o, el abajo firmante, cert	tifico la exactitud de esta i					
FIRMA:		FECHA:						

