

See instruction	ns for detailed information	Incomplete applications will be returned and will delay license renewal	Establishment Permit Class & Fee
Fees are		ip or location, a new application for licensur	e e
non-refundable		ICENSES ARE NOT TRANSFERABLE	Class I \$150.00
N	Make check payable to: U		Class II \$250.00
Name of Establishment:		24 hr Emergency Contact Phone	
			Class IV \$400.00
Street Address:		Phone #:	New or Renewal
Mailing		Phone #:	_
_		Fax #:	□ New □ Renewal
Email Address:			
Legal/Corporate		24 Hour Emergency Phone #	Seasonal
Owner:			Establishments Dates from:
Legal/Corporate Owner Address:			To:
Owner Address:		Dhona #	☐ Class I \$75.00
		Phone #:	☐ Class II \$125.00
		 Fax #:	☐ Class III \$175.00
Email Address:			☐ Class IV \$200.00
Email Flacioss.			
			<b>Operations Info</b>
			Day Hours
Site Manager:			Sun
Certified Food			Man
Protection Manager			Mon
Protection Manager (CFPM):			Tue
Protection Manager (CFPM):	Name of CFPM on application mu	ust match name on CFPM certificate	
(CFPM):	Name of CFPM on application mu		Tue
(CFPM): Approved Course:		ust match name on CFPM certificate  Exp	Tue Wed Thur
(CFPM): Approved Course:	Name of CFPM on application mu  Date:		Tue Wed Thur Fri
(CFPM): Approved Course:			Tue Wed Thur
(CFPM): Approved Course:			Tue Wed Thur Fri Sat
(CFPM):			Tue Wed Thur Fri Sat  Water Supply
(CFPM): Approved Course: Applicant		Exp	Tue Wed Thur Fri Sat  Water Supply  Well
Applicant Signature:			Tue Wed Thur Fri Sat  Water Supply  Well Community/Municipal
Applicant Signature: Applicant		Exp	Tue Wed Thur Fri Sat  Water Supply  Well Community/Municipal Off-site Catering
Applicant Signature: Applicant Printed Name:		Exp	Tue Wed Thur Fri Sat  Water Supply  Well Community/Municipal Off-site Catering Yes No
Applicant Signature: Applicant		Exp	Tue Wed Thur Fri Sat  Water Supply  Well Community/Municipal Off-site Catering
Applicant Signature: Applicant Printed Name: Applicant		Exp	Tue Wed Thur Fri Sat  Water Supply  Well Community/Municipal Off-site Catering Yes No Grease Interceptor
Applicant Signature: Applicant Printed Name: Applicant Title:	Date:	Exp  Date:	Tue Wed Thur Fri Sat  Water Supply  Well Community/Municipal Off-site Catering Yes No Grease Interceptor Exterior Tank
Applicant Signature: Applicant Printed Name: Applicant Title:		Exp	Tue Wed Thur Fri Sat  Water Supply  Well Community/Municipal Off-site Catering Yes No Grease Interceptor Exterior Tank AGRU Last Pumped Date:
Applicant Signature: Applicant Printed Name: Applicant Title:	Date:	Exp  Date:	Tue Wed Thur Fri Sat  Water Supply  Well Community/Municipal Off-site Catering Yes No Grease Interceptor Exterior Tank AGRU

# FOOD SERVICE LICENSE RENEWAL INFORMATION

### SEASONAL ESTABLISHMENTS

A food establishment that is seasonal in nature, ie; not to exceed a six month duration in any given year.

# ESTABLISHMENTS USING WELL WATER

Connecticut Public Health Code 19-13-B102 requires all food service establishments serviced by a well to **submit certified water test results, not more than 30 days old, to the local Director of Health**.

Samples must be taken by an approved testing facility (check the Yellow Pages under Laboratories) from a faucet inside your establishment. *Food Service owners or operators may NOT draw water samples*.

Establishments sharing a common well must provide a water sample drawn from the inside of each establishment.

# **CFPM**

Permit Class 2, 3 and 4 establishments (see Class Schedule below) are required by Public Health Code to have on staff at least **one Certified Food Protection Manager** (CFPM) and one Alternate Person In Charge.

A CFPM is a full-time employee who has shown proficiency of required information through passing a test that is part of an accredited program. This does not apply to certain types of food establishments deemed by the regulatory authority to pose minimal risk of causing, or contributing to, foodborne illness based on the nature of the operation and extent of food preparation.

The Alternate Person In Charge is currently under review by Connecticut DPH.

# PERMIT CLASSES OF FOOD SERVICE ESTABLISHMENTS

(No food service establishment shall change classification without Health District written approval)

- CLASS 1: A food establishment that does not serve a population that is highly susceptible to food borne illnesses and only offers (A) commercially packaged food in its original commercial package that is time or temperature controlled for safety, or (B) commercially prepackaged, precooked food that is time or temperature controlled for safety and heated, hot held and served in its original commercial package not later than four hours after heating, or (C) food prepared in the establishment that is not time or temperature controlled for safety.
- CLASS 2: A retail food establishment that does not serve a population that is highly susceptible to food-borne illnesses and offers a limited menu of food that is prepared, cooked and served immediately, or that prepares and cooks food that is time or temperature controlled for safety and may require hot or cold holding, but that does not involve cooling.
- CLASS 3: A retail food establishment that (A) does not serve a population that is highly susceptible to food-borne illnesses, and (B) has an extensive menu of foods, many of which are time or temperature controlled for safety and require complex preparation, including, but not limited to, handling of raw ingredients, cooking, cooling and reheating for hot holding.
- CLASS 4: A retail food establishment that serves a population that is highly susceptible to food-borne illnesses, including, but not limited to, preschool students, hospital patients and nursing home patients or residents, or that conducts specialized food processes, including, but not limited to, smoking, curing or reduced oxygen packaging for the purposes of extending the shelf life of the food.