Transient Retail Food License Application

Apply and pay online at Ci	ity of Madison Licenses & Permit		
	and payment by mail or in perso	OFFICE LISE ONLY, Dog	ord ID#: LICTFD:
Madison City Cle	rk's Office:		
210 Martin Luthe	er King Jr. Blvd., Room 103, Madi	son, WI 53703	
Make checks payable to C	ity of Madison Treasurer.		
For questions, to get help 242-6515 or LEAdmin@pu	- · · · · - · · · · · · · · · · · · · ·	other language, or to contact a san	itarian, call Environmental Heath at (608)
A. BUSINESS/ORGA	NIZATION INFORMATION		
NAME/DBA:			
STREET ADDRESS:		CITY, STATE, ZIP:	
B. OFF-SITE KITCHEN	N		
in advance for the off-sit	d handling or dishwashing will oc te commercial kitchen, if not alre hk Licensing for application, fee s	ady licensed.	tional Retail Food License must be obtained
ARE YOU USING AN OFF-		, ,	
Yes Yes	SHE KHCHEN!	Off-site kitchen addres	ss:
☐ No – all activity done	e onsite at event		
exempt days per y		neal foods. If exceeding fee exemp	for serving or selling meals, and 12 fee- ot days, licensing and payment apply,
C. CONTACT PERSO	ON INFORMATION		
NAME:	PHONE:		EMAIL:
D. LICENSE FEE TAB	LE		
Time/Temperature Cont holding and/or hot holdi	• • • •	al products that require temperatur	re control for safety. Examples are cold
Pre-packaged means ind	ividually packaged at off-site lice	nsed facility, and sold to consumer	in this manner.
Licenses expire June 30 o	of each year. Licenses issued bet	ween April 1 and June 30 will expire	on June 30 of the following year.
Multiple stands operatin	g simultaneously require separa	te licenses. Please fill out separate a	application for each license:
Food Type	TCS	Non-TCS	Prepackaged TCS
Fee (Please check only o	ne box) \$170.40 □	\$129.00 □	\$95.40 □
E. CONSENT AND S	IGNATURE		
comply with all the r		-	at a Public Health Office) and agree to ation. I understand that WI Food Code
SIGNATURE:		DATE:	
			····· D. J. I. a. I. l. a. I. l.

