

Retail Food Application

LICENSE REQUIREMENTS:

- Annual licenses run July 1 - June 30
- A license is required for any owner, operator or agents of the following:
 - Restaurant, Mobile/Base and Retail Food Establishments
- Licenses are not prorated

HOW TO APPLY:

Complete this application and submit with the following:

- A plan review may be required
- Proposed menu
- Detailed floor plan including all sinks, equipment and storage areas

LICENSE FEES:

- License fees vary based on type of facility.
- The Environmental Health Specialist will determine the applicable license fee.
- All new, change of operator or remodels require a pre-inspection fee in addition to a license fee. Payment is required before a pre-inspection can be scheduled.
- Payment is accepted by *cash, check or credit card*, payable to the Wauwatosa Health Department. *Online payment available by request.*
- Current fee schedule can be found at:
https://wauwatosa.municipalcodeonline.com/book?type=fees#name=Health_Department



CONTACT INFORMATION FOR PHYSICAL LOCATION			
Common Name (Doing Business As):		Business Email:	
Business Address (Location of facility):		Business Phone:	
City:	State:	ZIP Code:	
Name of Contact at Facility:		Cell phone:	
CONTACT INFORMATION FOR LICENSEE			
Licensee (individual, partnership or corporation):		Owner/Franchisee Name:	
Email (if different from facility email):		Business Phone (if different from facility phone):	
Billing Address (if different from facility location):			
City:	State:	ZIP Code:	Cell phone:
Mail renewal notification to: <input type="checkbox"/> Physical Location Address <input type="checkbox"/> Licensee Address			
PLAN REVIEW and/or PERMIT			
TYPE OF PLAN REVIEW/PERMIT			
<input type="checkbox"/> New building construction <i>and</i> new food service permit <input type="checkbox"/> Remodel with existing permit <input type="checkbox"/> Change of ownership <i>with remodel</i> <input type="checkbox"/> Change of ownership— <i>no remodel</i>			
Anticipated date of opening: _____			
ARCHITECT INFORMATION (if available)			
Company name:		Email:	
Contact name:		Business Phone:	
City:	State:	ZIP Code:	Fax Number:



ESTABLISHMENT INFORMATION

Briefly describe the type of food operation you are applying for. Include any special processes that may require a variance or a HACCP Plan (curing, smoking, vacuum sealing, drying, acidification, sous vide, etc.).

Is a copy of proposed menu and floor plan attached? Yes No

Please answer the following questions as they pertain to your food establishment.

Business is a: Restaurant Retail food establishment Mobile restaurant/Base

Does food establishment contain a self-service salad or food bar? Yes No

Does food establishment use raw poultry, eggs, meat, or seafood? Yes No

Does any food require preparation such as chopping, dicing, slicing, boiling, cooking, packaging, or assembly in order to be served? Yes No

Is the seating capacity of the food establishment over 75 people? Yes No

Are any potentially hazardous foods reheated, or hot or cold held?
 Yes No

Does food establishment have a drive-up/walk-up service window? Yes No

Are any potentially hazardous foods cooled for next day? Yes No

Does food establishment have more than one area where food prep occurs? Yes No

Does food establishment provide catering or prepare meals in bulk quantity for events?
 Yes No

Does food establishment serve nursing homes or daycares? Yes No

Does food establishment use Time as a Public Health Control or Bare Hand Contact Plan? Yes No

FOR RETAIL ESTABLISHMENTS ONLY

Projected annual food sales are:

- Over \$5,000,000
- \$1,000,000 to \$5,000,000
- \$25,000 to \$1,000,000
- Under \$25,000
- Does not engage in food processing

I certify that I am familiar with and agree to comply with all state and local laws, ordinances, and regulations as required in the Wisconsin Food Code and Wauwatosa Municipal Code.

Signature of licensee or agent	Title	Date
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To begin the licensing process, mail or drop off the completed application, menu and floor plan to:

Wauwatosa Health Department
7725 W. North Avenue
Wauwatosa, WI 53213
 Or email to: cameen@wauwatosa.net

Do not send any payment at this time. Upon receipt and review of your application, you will be contacted to discuss any pre-opening requirements and charges for your establishment.

Within 30 days of receipt of a completed application for a facility license, the Wauwatosa Health Department shall either approve or deny the application. If the application for a license is denied, the Wauwatosa Health Department shall give the applicant reason, in writing, for the denial. A license shall not be issued to an operator without prior inspection and all applicable fees paid. License will be issued according to Wisconsin Statutes 75 and 97.



CERTIFIED FOOD PROTECTION MANAGER INFORMATION

Establishments that engage in restaurant activities are required to have a certified food protection manager.

To meet regulatory requirements, required personnel must post the exam certificate, taken within the past 5 years, for review by inspection staff.

Small operators, 5 or fewer food handlers, that have a certified food protection manager who has already taken the full certification exam and is renewing within 90 days after the expiration date of their initial certified food protection manager credential may use the Food Safety for Small Operators (Recertification) course to meet the requirement.

The operator or manager of an establishment that is new or undergoing a change-of-operator must have a food manager with the appropriate credential within the first 90 days after opening.

Read more about the specifics on the Wisconsin Department of Agriculture, Trade and Consumer Protection (DATCP) website at: https://datcp.wi.gov/Pages/Programs_Services/foodmanager.aspx

Wisconsin currently accepts the following food manager certification exams:

- [Prometric Inc - Certified Professional Food Manager Course Examination](#)
- [National Restaurant Association- ServSafe \(SS\) Course Examination](#)
- [Environmental Health Testing, LLC - Food Safety First Principles Course Examination](#)
- [360 Training Inc](#)
- [Above Training/State Food Safety](#)