



Flavored Ice Establishment Permit Application

Physical Address: 22 South State Street, Clearfield, UT 84015

Mailing Address: P.O. Box 618, Farmington, UT 84025

Phone: 801-525-5128 Fax: 801-525-5119

Establishment Information

Establishment Name:	Establishment Phone Number:
Physical Address:	City/State/Zip:
Email Address:	Days and Hours of Operation:

Invoice Information

Name:	
Billing Address:	City/State/Zip:

Mailing Information

Name:	
Mailing Address:	City/State/Zip:

Owner/Corporation Information

Owner Name:	Corporation Name:
Owner Email Address:	Owner Phone Number:
Owner/Corporation Address:	City/State/Zip:
Local Contact Name:	Local Contact Phone/Email:

Type of Permit: New Establishment Permit Renewal

BEFORE COMPLETING THIS APPLICATION, PLEASE READ THE FOLLOWING:

- A Flavored Ice Establishment is issued a Permit to Operate that is valid between April 1st and Oct 31st for a single location. The permit must be renewed annually.
- Food items allowed include: ice; flavored syrups; single-service containers of ice cream; packaged cream, milk, half-and-half; pressurized whipped cream; and sweetened condensed milk.
- All dairy items must be stored at or below 41° F.
- All waste water must be discharged to the sanitary sewer system.
- Permit fees are not refundable and permits are not transferrable.

Requested permit will be issued only after a satisfactory pre-opening inspection has been conducted and the required permit fee has been received. Operating a food service establishment prior to permit issuance, other than an authorized renewal procedure, is a Class B Misdemeanor. Applicant agrees that maintenance of a health permit is predicated on compliance with the Davis County Food Service Sanitation Rules and Regulations. This permit is revocable for non-compliance. **I agree to comply with all laws governing food service in Davis County.**

Signature of Applicant: _____ Date: _____ Title: _____

Permit Approval Office Use Only

<input type="checkbox"/> Plan/Site Review Fee	Date Paid _____	Receipt # _____	Amount Paid _____
<input type="checkbox"/> Permit Fee	Date Paid _____	Receipt # _____	Amount Paid _____

Scheduled Opening Date: _____

Food Preparation and Storage

All food preparation and storage must take place at the approved establishment or at an approved commissary.

Will food be prepared off-site? Yes No If yes, specify location: _____

Where will food be purchased? _____

Where will food items, ice, and potable water be obtained? _____

What dairy products will be offered at your establishment?

Ice Cream Sweetened Condensed Milk N/A Other (Specify) _____

Where will flavored syrups and ice be prepared? _____

Will other food items be served? Yes No If yes, please specify: _____

All food must be stored at least six (6) inches off of the floor.

Cleaning / Sanitizing

Sanitizer is required to clean food contact / food preparation surfaces. Test strips must be available for the sanitizer being used to ensure appropriate concentrations (chlorine bleach = 100 ppm and quaternary ammonia = 150-400 ppm – follow manufacturer's recommendations).

Identify which sanitizer will be used at the establishment.

Chlorine Bleach Quaternary Ammonia Other (specify) _____

Cold Holding Equipment

Check all that apply.

Identify methods that will be used to maintain cold holding temperatures

Mechanical Refrigeration/Freezer Ice Chest
 Cold Table Other (Specify) _____

A thermometer is needed in each refrigeration unit. Outdoor storage equipment must be secure.

Sink Requirements

HANDWASH SETUP

A permanent hand wash sink is required in all Flavored Ice Establishments. The establishment must have hot and cold running water during all hours of operation.

Operating without a fully equipped handwash sink may result in the suspension of the establishments operating permit.

A fully equipped handwash sink requires:

- Liquid Soap
- Paper Towels
- Ten (10) gallon minimum clean water
- Waste water tank minimum 15% larger than clean water tank

DISHWASHING SETUP

A permanent three-compartment sink for washing syrup bottles, scoops, and other equipment is required in all Flavored Ice Establishments. Compartments must be large enough to accommodate all equipment to be cleaned and sanitized using this method.

Personnel

EMPLOYEE HEALTH

Do you have an employee health policy which requires employees to notify management if they are exhibiting any of the reportable symptoms? Yes No

Employees should notify management if they are exhibiting any of the following symptoms:

- Sore throat WITH a fever
- Jaundice (yellowing of the eyes/skin)
- Vomiting
- Diarrhea
- Open wounds, sores or lesions on the hands or arms

Is there a plan for cleaning up of vomit if an employee were to get sick while at work? Yes No

FOOD HANDLER PERMITS

Copies of food handler permits for all employees must be kept on file at the establishment and must be made available upon request during an inspection.

Equipment / Utensil Use and Storage

- All eating and drinking utensils given to the public must be disposable.
- All utensils and equipment must be washed, rinsed, and sanitized before use, after potential contamination, and at least every 4 hours.
- Single-use utensils must be handled and stored to prevent contamination.
- All cups, utensils, and equipment must be stored at least six (6) inches off of the floor.

Waste Disposal

WASTE WATER

Where will waste water be disposed? _____

SOLID WASTE

Where will solid waste be disposed? _____

Physical Facilities

FLOORS, WALLS, & CEILINGS

All surfaces must be smooth, non-absorbent, easy to clean, and in good repair.

Flooring material: _____ Wall material: _____ Ceiling material: _____

FOOD EQUIPMENT

All food equipment must be maintained in good repair (no corrosion, cracks, chips, etc.)

INSECT CONTROL

All outer openings of the establishment must be protected from the intrusion of insects.

LIGHTING

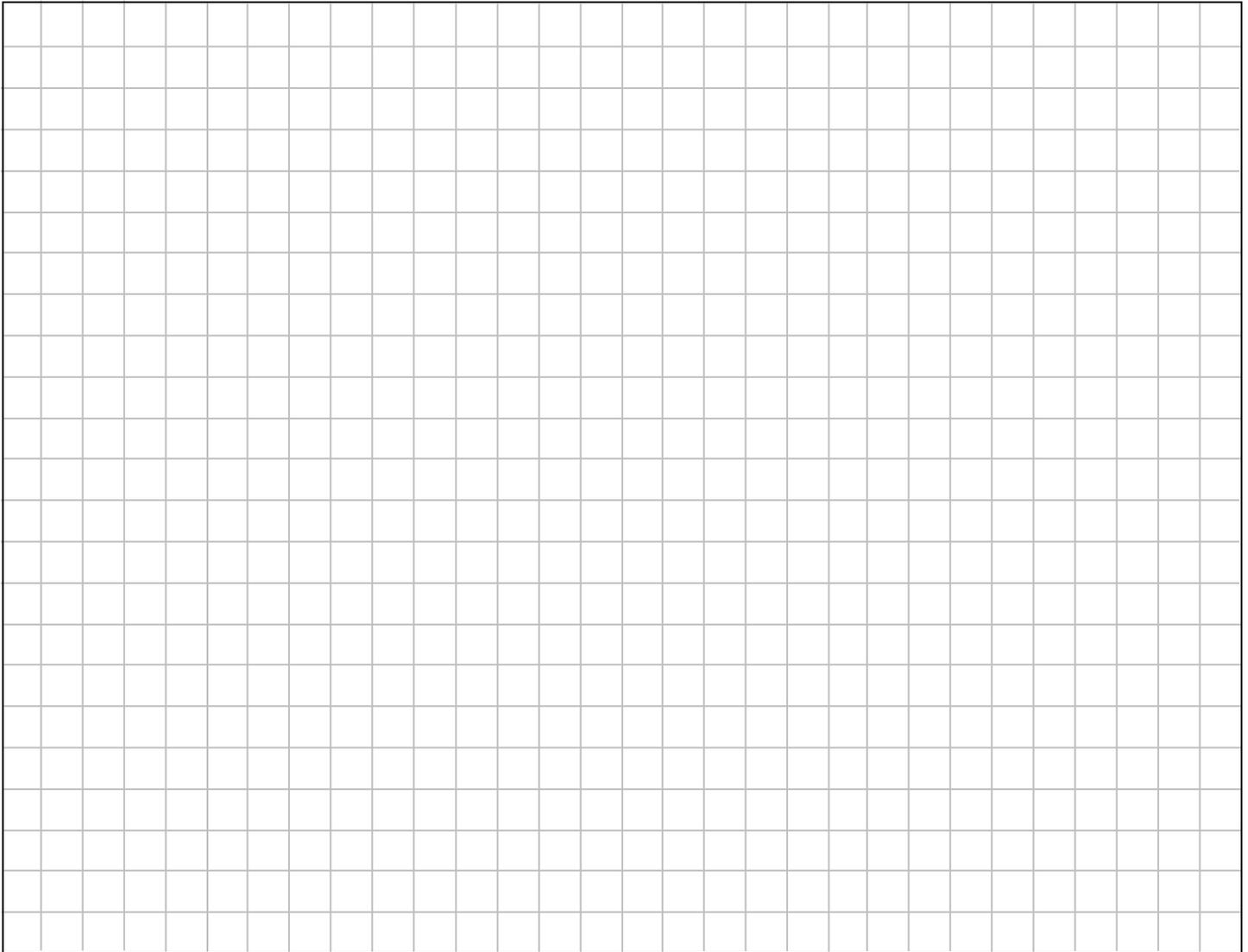
All lights must be shielded or shatter-resistant.

EMPLOYEE PERSONAL ITEMS

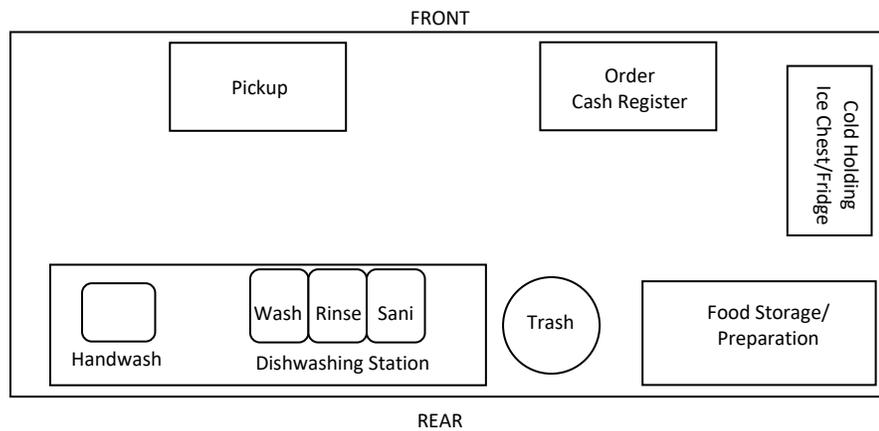
Where will employee personal items be stored during operation? _____

Flavored Ice Establishment Sketch

In the following space, provide a drawing of your proposed establishment. Draw and label all equipment, food preparation tables, food storage, dishwashing, and handwashing. See example at the bottom of this page.



Example:





Flavored Ice Self-Inspection Checklist

Establishment Name: _____ Location: _____
 Completed By: _____ Date: _____

Mark next to each item to indicate it has been completed or is being performed.

1	PERMIT/SUPERVISION	Check box below
a	Permit Posted: Permit is posted in a conspicuous location.	
b	Food Handler Permits: Copies of food handler permits must be on file, and accessible during an inspection, for all employees.	
c	Approved Personnel: Individuals not involved in food operations are not allowed in the establishment.	
2	EMPLOYEE HEALTH/GOOD HYGENIC PRACTICES	Check box below
a	Employee Health: Employees do not exhibit signs/symptoms of illness.	
b	Personal Hygiene: Employees maintain personal cleanliness, wear clean clothing, and wear hair restraints or hats.	
c	Eating, Drinking, and Smoking: No eating or smoking is allowed in the establishment. Employee personal food and drinks must be stored to prevent contamination of foods and equipment.	
3	PREVENTION OF CONTAMINATION BY HANDS	Check box below
a	Water Supply: A tank that is sized to provide a minimum of ten (10) gallons of fresh water is required.	
b	Waste Water Container: Minimum 15% larger than fresh water tank.	
c	Paper Towels and Soap: Paper towels and liquid soap are provided.	
d	No Bare Hand Contact: Employees are not using bare hands on contact with ready-to-eat foods.	
e	Handwashing: Employees are appropriately washing their hands.	
4	APPROVED SOURCE	Check box below
a	Approved Source: All food is obtained from commercial or retail food establishment (restaurant or store). All food shall be prepared on-site or at a pre-approved, permitted food establishment.	
b	Potable Water: Water used for food preparation (ice and syrups), cleaning, sanitizing, handwashing, and drinking must be potable. Hoses used for obtaining water must be food grade quality and dedicated only for food use.	
c	Other food items: Food items on-site are limited to menu items approved by the health department.	
5	PREVENTION FROM CONTAMINATION	Check box below
a	Sanitizer Concentration: Chlorine bleach = 50-200 ppm or Quat = 150-400 ppm	
b	Food Contact Surfaces: All food contact surfaces are washed, rinsed and sanitized as required.	
6	TEMPERATURE CONTROL	Check box below
a	Cold Holding Temperatures: Temperature Control for Safety (TCS) foods are held cold at or below 41° F.	
b	Thermometers: A thermometer is provided to measure food holding temperatures.	
7	TOXIC SUBSTANCES/WAREWASHING	Check box below
a	Chemical Storage: Approved chemicals are properly stored, labeled, and used as recommended.	
b	Sanitizer Test Strips: Appropriate test strips are available for use.	
c	Dishwashing: A dishwashing setup, consisting of three (3) basins, is available for washing (soap and water), rinsing (clean water), and sanitizing (sanitizing solution) utensils and equipment. Space is provided for utensils to air dry after sanitizing.	

(over)

8	PREVENTION OF FOOD CONTAMINATION	Check box below
a	Food Storage: All food is stored at least six (6) inches off the ground. Food is not stored in standing water inside ice chests.	
b	Food Labeled: All food is properly labeled, in original container, or easily identifiable.	
c	Insects, Rodents, Animals: Insects, rodents and animals are not present in the establishment. Pesticides must be approved for use in a food service establishment.	
d	Single Service Items: Single service utensils are protected from contamination.	
e	Wiping Cloths: Wet wiping cloths are properly stored and used.	
9	UTENSILS / EQUIPMENT	Check box below
a	Utensil Storage: All utensils and equipment are stored at least six (6) inches off the ground. Single-service utensils provided to customers must be protected from contamination.	
b	Non-food Contact Surfaces Clean: All non-food contact surfaces are clean.	
c	In-Use Utensils: In-use food dispensing utensils are properly stored.	
d	Surfaces: All surfaces are smooth, non-absorbent, and easy to clean.	
10	PHYSICAL FACILITIES	Check box below
a	Garbage: Leak-proof and insect-proof garbage containers with a plastic liner must be provided. Waste is disposed of at an approved location.	
b	Waste Water: Waste water is properly contained. An approved method of disposal must be used.	
c	Lighting: Adequate lighting is provided. Bulbs are shielded or shatter resistant.	
d	Employee Items: Employee personal items are properly stored	