



**CLARK COUNTY PUBLIC HEALTH**  
1601 E. Fourth Plain Blvd. ♦ P.O. Box 9825  
Vancouver, WA 98666-8825  
Phone (360) 397-8428 ♦ Fax (360) 397-8091

## ESPRESSO CART PACKET

Before beginning operation or change ownership of an espresso cart, the following information must be provided to Clark County Public Health:

1. **PLAN REVIEW APPLICATION FORM.** Complete the yellow Plan Review Application form.
2. **PERMIT APPLICATION FORM.** Complete the green Food Service Establishment Permit form.
3. **PLAN REVIEW FEE.** Pay the non-refundable plan review fee.
4. **MENU.** Provide a menu or list of foods to be served.
5. **METHOD OF FOOD PREPARATION.** Provide information on beverage and food preparation.
6. **CART PLAN.** Provide a schematic drawing, to a quarter inch scale (1/4 inch = one foot), of the proposed cart. This drawing must show the following:
  - Hand wash sinks;
  - Location of hot water heater (provide a specification sheet);
  - Location, size or capacity of wastewater tanks;
  - Location, size and type (i.e. stainless steel) of potable water tanks;
  - Commercial refrigeration, model and brand;
  - Provide description of finishes on counter tops and floors.
7. **EQUIPMENT AND UTENSIL CLEANING AND SANITIZING.** Provide a three-compartment sink in a licensed food service establishment where equipment and utensils must be washed. Provide a letter of agreement for use of this facility.
8. **WASTE WATER DISPOSAL.** State the location of mop sink used for wastewater disposal. Provide a letter of agreement for the use of this facility. If an RV dump site is used for wastewater holding tank disposal, a letter of agreement and site address for the facility must be provided.
9. **TOILET FACILITIES LOCATION.** Provide the location of toilet(s) to be used by employees. Provide a letter of agreement to use these facilities.

**THE ABOVE ITEMS MUST BE SUBMITTED WHEN PAYING FOR A PLAN REVIEW.**  
If any of these items are omitted, the plan review cannot be accepted.  
**ALLOW AT LEAST TWO WEEKS FOR PLAN REVIEW COMPLETION.**

Following plan approval:

- √ **MAKE AN APPOINTMENT FOR A PRE-OPENING INSPECTION.** A pre-opening inspection of the food establishment must be conducted. Call (360) 397-8428 at least one week in advance to schedule this on-site inspection.
- √ **PAY FOR PERMIT.** Before opening, the food service permit must be paid.

**COMPLIANCE WITH CHAPTER 246-215 WAC IS REQUIRED**

1. **WATER SUPPLY.** Water must be adequate in quantity and quality, supplied by a source approved under WAC 246-290 and monitored according to standards.
2. **SEWAGE SYSTEM.** Provide that all liquid wastes, including ice melt, are disposed into an approved sewage disposal system.
3. **FOOD SOURCE.** All food, including ice, must be from an approved source or commissary and all prepackaged foods must be properly labeled.
4. **REFRIGERATION.** Provide commercial refrigeration units sufficient for all appropriate foods to maintain temperatures to 41°F or less.
5. **THERMOMETERS.** Provide all refrigeration units with accurate thermometers. Provide an accurate metal stem thermometer to monitor hot and cold food temperatures in the kitchen and after transportation to the food service site.
6. **HAND WASH SINK.** In the kitchen, a hand wash sink must be present which is accessible, convenient and used exclusively for hand washing. The hand wash sink shall have hot and cold water provided through a mixing faucet. There shall be soap dispenser and single use paper towels at the sink.
7. **PLUMBING.** Plumbing must be sized, installed and maintained in accordance with applicable Washington State and local plumbing codes. Provide indirect drains at the food preparation sinks, icemaker and any ice bins.
8. **DISH WASHING.** Provide a location for cleaning and sanitizing of equipment and utensils, either a three compartment sink with a drain board or a mechanical dishwasher with a three-compartment sink.
9. **EQUIPMENT AND UTENSILS.** Provide that equipment and utensils are cleanable, durable, in good repair, and in conformance with the current standards and listing of the National Sanitation Foundation.
10. **SINGLE SERVICE WARE.** Only single service ware may be provided for use by the consumer.
11. **SANITIZING SOLUTION.** Provide a wiping cloth stored in an approved sanitizing solution at all times to clean up food spills, wipe work surfaces, counters or equipment
12. **SMOKING.** The use of tobacco is prohibited in any food preparation area, transportation area, and food service area.
13. **GARBAGE STORAGE.** Provide leak proof, vermin proof, and covered container. Provide for appropriate frequency of garbage pickup.
14. **TOILETS.** A toilet must be readily accessible and available within at least 200 feet of the commissary kitchen. Toilet facilities must have a hand-washing sink with hot and cold running water, single service soap and towel dispenser.
15. **FOOD AND BEVERAGE WORKER CARDS.** All food workers must obtain and maintain a valid Washington State Food and Beverage Worker card. For food and beverage worker testing times and information, call (360) 397-8435.

For further information, please call Clark County Public Health at (360) 397-8428, press option 0, and ask to speak with an environmental health specialist in the Food Safety Program.



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## PLAN REVIEW APPLICATION FORM

**RESTAURANT NAME OR NAME OF ESTABLISHMENT** \_\_\_\_\_

SITE ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE WA ZIP \_\_\_\_\_

SITE PHONE NUMBER \_\_\_\_\_ ESTIMATED OPENING DATE \_\_\_\_\_

**BUSINESS NAME OF OWNER OR CORPORATION NAME** \_\_\_\_\_

BUSINESS OWNERSHIP STATUS:  Sole Proprietor  Partnership  Corporation  LLC

LIST ALL OWNERS, PARTNERS, CORPORATE OFFICERS OR MEMBERS.

OWNER NAME \_\_\_\_\_ OWNER NAME \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_ BUSINESS FAX \_\_\_\_\_

**IS THIS A CHANGE OF OWNERSHIP?** NO  YES  **IF Yes, date of change:** \_\_\_\_\_

**If Yes, previous name of the restaurant?** \_\_\_\_\_

**IS THIS:**  New construction or conversion of an existing building to a restaurant

An existing restaurant/kitchen remodel

Construction company contact person \_\_\_\_\_ PHONE \_\_\_\_\_

**BUILDING DEPARTMENT PERMIT NUMBER:** \_\_\_\_\_

**TO WHOM SHOULD THE PLAN REVIEW LETTER BE MAILED?**

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**WATER:**  Amboy (CPU)  Battle Ground  CPU  Camas  Vancouver  Washougal  Yacolt (CPU)  Other \_\_\_\_\_  
 Small Public Water Supply Name \_\_\_\_\_ ID# \_\_\_\_\_

**SEWAGE:**  Public sewer  On-site septic system. **Date of last septic system inspection or pumping:** \_\_\_\_\_

**TYPE OF ESTABLISHMENT: Check one or more** of the boxes below that best describe the type of establishment planned.

- |                                     |   |   |  |  |
|-------------------------------------|---|---|--|--|
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> School Cafeteria | <input type="checkbox"/> Annual Itinerant/Farmer's Market | <input type="checkbox"/> Bakery (only)           | <input type="checkbox"/> Grocery/Convenience Store |
| <input type="checkbox"/> Tavern/Bar | <input type="checkbox"/> Head Start       | <input type="checkbox"/> Public Kitchen/Grange            | <input type="checkbox"/> Meat/Fish Market (only) | <input type="checkbox"/> with Deli                 |
| <input type="checkbox"/> Concession | <input type="checkbox"/> Mobile Truck     | <input type="checkbox"/> Espresso Cart/Stand              | <input type="checkbox"/> Caterer                 | <input type="checkbox"/> with Bakery               |
|                                     |   |   |  | <input type="checkbox"/> with Meat Market          |

**COMMISSARY LOCATION** (For Annual Itinerant, Mobile Unit or Caterer) \_\_\_\_\_ ID # \_\_\_\_\_

**BASE OF OPERATION LOCATION** (For Espresso Cart or Mobile Truck) \_\_\_\_\_

**APPLICANT'S SIGNATURE**

**DATE**

### FOR OFFICIAL USE ONLY

DATE PAID: \_\_\_\_\_ INV \_\_\_\_\_ OW \_\_\_\_\_ EHA: \_\_\_\_\_

AMT RCVD: \$ \_\_\_\_\_ AR \_\_\_\_\_ FA \_\_\_\_\_ SR \_\_\_\_\_ PR \_\_\_\_\_



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## FOOD SERVICE PERMIT APPLICATION FORM

THIS FORM MUST BE COMPLETELY FILLED OUT AND SIGNED FOR A NEW PERMIT OR TO RENEW AN EXISTING PERMIT

**NAME OF FOOD ESTABLISHMENT** \_\_\_\_\_

SITE ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE WA ZIP \_\_\_\_\_

SITE PHONE \_\_\_\_\_ FAX NUMBER \_\_\_\_\_

MAIL CAN BE RECEIVED AT THE ABOVE SITE ADDRESS:  YES  NO

IF NO, LOCAL MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE WA ZIP \_\_\_\_\_

SITE E-MAIL ADDRESS \_\_\_\_\_

**OWNER INFORMATION:**

**BUSINESS NAME or CORPORATION NAME** \_\_\_\_\_

OWNERSHIP STATUS OF ABOVE:  Sole Proprietor  Partnership  Corporation  LLC

LIST ALL THE OWNERS, PARTNERS, CORPORATE OFFICERS OR MEMBERS:

OWNER NAME \_\_\_\_\_ OWNER NAME \_\_\_\_\_

OWNER HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

OWNER PHONE \_\_\_\_\_ HOME/EMERGENCY CONTACT PHONE \_\_\_\_\_

MAIL CAN BE RECEIVED AT THE ABOVE OWNER ADDRESS:  YES  NO

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

OWNER E-MAIL ADDRESS \_\_\_\_\_

**BILLING INFORMATION:**

NAME \_\_\_\_\_ CARE OF \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BILLING PHONE \_\_\_\_\_ BILLING FAX NUMBER \_\_\_\_\_

**ANNUAL GROSS FOOD, BEVERAGE & ALCOHOL REVENUE** (For restaurants and taverns only)  
Check one: A.  0- \$250,000 B.  \$250,000 - \$500,000 C.  \$500,000 - \$750,000 D.  \$750,000 - \$1,000,000 E.  \$1,000,000 and over

**WASHINGTON STATE TAX ID #** \_\_\_\_\_

**IS THIS A CHANGE IN OWNERSHIP?** NO  YES   
If YES, date of change: \_\_\_\_\_ Previous establishment's name: \_\_\_\_\_

**WATER:**  Amboy (CPU)  Battle Ground  CPU  Camas  Vancouver  Washougal  Yacolt (CPU)  Other \_\_\_\_\_  
 Small Public Water Supply Name \_\_\_\_\_ and ID # \_\_\_\_\_

**SEWAGE:**  Public Sewer  On-site septic system. Last inspection date: \_\_\_\_\_ **\*ATTACH COPY OF THIS INSPECTION**  
(SEE [www.onlinerme.com](http://www.onlinerme.com))

**TYPE OF ESTABLISHMENT:** Check one or more of the boxes below that best describes type of establishment:

|                                     |   |  |   |   |
|-------------------------------------|---|--|---|---|
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> School Cafeteria | <input type="checkbox"/> Public Kitchen                      | <input type="checkbox"/> Bakery           | <input type="checkbox"/> Grocery Store    |
| <input type="checkbox"/> Tavern/Bar | <input type="checkbox"/> Head Start       | <input type="checkbox"/> Annual Itinerant/Farmer's Market ** | <input type="checkbox"/> Meat/Fish Market | <input type="checkbox"/> with Deli        |
| <input type="checkbox"/> Seasonal** | <input type="checkbox"/> Mobile Unit**    | <input type="checkbox"/> Espresso Cart/Stand**               | <input type="checkbox"/> Caterer**        | <input type="checkbox"/> with Bakery      |
|                                     |   |  |   | <input type="checkbox"/> with Meat Market |

**\*\*CURRENT MEMORANDUM OF AGREEMENT FOR COMMISSARY USAGE MAY BE REQUIRED FOR PERMIT**

**APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

As the Manager and/or Owner, I do hereby make application for a permit to operate a food establishment in compliance with the Rules and Regulations of the State Board of Health for Food Service Chapter 246-215 WAC. I understand that this permit is **NON-REFUNDABLE** and **NON-TRANSFERABLE** to a new owner or a new location. I give Clark County Public Health permission to verify revenue information provided about this food establishment.

**FOR OFFICIAL USE ONLY**

DATE PAID: \_\_\_\_\_ INV \_\_\_\_\_ OW \_\_\_\_\_ EHA: \_\_\_\_\_

AMT RCVD: \$ \_\_\_\_\_ AR \_\_\_\_\_ FA \_\_\_\_\_ SR \_\_\_\_\_ PR \_\_\_\_\_



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### REQUIREMENTS FOR FOOD VENDORS

To sell PREPARED FOOD not listed on the Exempt Food List you will need to do the following:

1. Complete an application at least 14 calendar days before the event; and
  - a. If you plan to be at 1 or 2 events during the year, obtain a [TEMPORARY PERMIT](#).
  - b. If you plan to be at multiple events during the year an [MULTI EVENT \(ITINERANT\) PLAN REVIEW & PERMIT APPLICATION](#) may be more appropriate.
  - c. Obtain a [FOOD WORKER CARD](#).
2. Pay the appropriate [FEES](#).
3. Read, become familiar with and comply with the safety rules in the [Food Vendor Information](#) pamphlet, which must be posted in your booth.

To sell or offer to the public ONLY foods from the Exempt Food List (see [list](#)) you will need to do the following:

1. Complete an [EXEMPT FROM PERMIT APPLICATION](#).
2. Obtain a [FOOD WORKER CARD](#).
3. Read, become familiar with and comply with the safety rules in the [Food Vendor Information](#) pamphlet, which must be posted in your booth.

## FOODS EXEMPT FROM REQUIRING A PERMIT

These foods are exempt from requiring a permit when sold or offered to the public. An [EXEMPT FROM PERMIT APPLICATION](#) and [FOOD WORKER CARD](#) are required.

**IMPORTANT:** Read and become familiar with the safety rules in the [FOOD VENDOR INFORMATION](#) pamphlet, which must be posted in your booth.

The sale of commercially packaged, non-potentially hazardous food does not require a permit. A license from the Washington Department of Agriculture is required when packaging any food yourself.

1. **Popcorn and flavored popcorn**
2. **Cotton candy**
3. **Dried herbs and spices processed in an approved facility\***
4. **Machine-crushed ice drinks such as Slurpees™, Slushees™, Ices™, and iced coffees containing no potentially hazardous ingredients and made with ice from an approved source. Machine crushed ice drinks do not include ice beverages such as shaved ice, fountain drinks such as soda pop, or sno-cones**
5. **Corn on the cob**
6. **Roasted nuts and roasted, candy-coated nuts**
7. **Deep-fried pork skins prepared from pork skins rendered at a food processing plant**
8. **Caramel apples**
9. **Chocolate-dipped ice cream bars prepared from pre-packaged ice cream bars produced in a USDA or WSDA food processing plant\*\***
10. **Chocolate-dipped bananas peeled and frozen in an approved facility**
11. **Individual samples of non-potentially hazardous sliced fruits and vegetables**
12. **Whole and uncut fresh fruits and vegetables**
13. **Whole, roasted peppers for immediate consumption\*\*\***
14. **Non-potentially hazardous baked goods, such as brownies, cookies and fruit pies prepared and wrapped in a sanitary manner by a non-profit organization operating for religious, charitable or educational purposes AND with a sign, clearly visible to customers, stating that these items are prepared in a kitchen that is not inspected by Clark County Public Health.**

\* Approved facility is a kitchen permitted by or otherwise acceptable to the local health department.

\*\* A food processing plant is a commercial operation which manufactures, packages, labels, or stores food for human consumption and does not provide food directly to a consumer.

\*\*\* Served to the public within 30 minutes of preparation, not hot held.



# CLARK COUNTY PUBLIC HEALTH FOOD SAFETY PROGRAM 2011/2012 FEE SCHEDULE

The definitions and fees listed below are for general informational purposes only.  
Please consult Clark County Public Health (CCPH) with the specifics of your operation.

| <b>FOOD PLAN REVIEW</b>   |                |
|---|----------------|
| <p><b>1-time only</b> fee paid before opening a food establishment. The Food Plan Review fee varies, depending on the type of food establishment.</p> <p>In addition to a Food Plan Review fee, an Annual Permit Fee is required</p>  |                |
| <b>NEW CONSTRUCTION</b>   | <b>\$633</b>   |
| Establishment not previously preparing and/or selling food.   |                |
| <b>REMODEL/OPERATING MODIFICATIONS</b>  | <b>\$399</b>   |
| Existing and currently operating food establishment to undergo structural or equipment change; previously operating food establishment that is reopening; or ownership change that results in changes to the previously approved menu, food preparation steps, or complexity level. |                |
| <b>ESPRESSO/BEVERAGE, MOBILE UNITS, FARMER'S MARKET, MULTIPLE EVENT VENDORS</b>   | <b>\$399</b>   |
| New food service that occurs only in conjunction with scheduled events such as farmers markets or community festivals; or espresso or other beverage establishments.  |                |
| <b>CHANGE OF OWNERSHIP</b>  | <b>\$150</b>   |
| Ownership change of an existing, operating food establishment that results in only minimal changes to menu; and when notification is provided to Clark County Public Health 30 days or more prior to opening.   |                |
| When notification is <u>not</u> provided 30 days or more prior to opening.  | <b>\$250</b>   |
| <b>ADDITIONAL REVIEWS</b>   | <b>\$94/hr</b> |
| Fee assessed for limited venue or when plan review and pre-opening inspection time exceeds 2 hours.   |                |

| <b>COMPLEXITY LEVEL</b>  |
|--|
| <p>Depending on the complexity of the menu, different food establishments have varying Annual Permit Fees.</p>   |
| <p><b>EXEMPT FROM PERMIT</b><br/>Pre-packaged non-potentially hazardous foods.</p> <p><i>Examples:</i> Candy bars, packaged nuts, soda, gum; and foods, such as cotton candy, popcorn, and candy apples may be prepared and sold without a permit. Complete list available upon request.</p>   |
| <p><b>LEVEL 1</b><br/>Pre-packaged foods; limited preparation required; heating and hot holding limited to 2 potentially hazardous foods. Most baked goods.</p> <p><i>Examples:</i> Grocery carrying pre-packaged products such as dairy, eggs, blended drinks, pre-packaged sandwiches made in an approved facility; espresso stand serving pre-packaged items made in an approved facility; ice cream/yogurt shop.</p> |
| <p><b>LEVEL 2</b><br/>Proteins must be purchased pre-cooked; cooling not permitted; hot held leftovers must be discarded daily.</p> <p><i>Examples:</i> Pre-cooked hamburgers and proteins; sandwiches; soups, and pizza.</p>  |
| <p><b>LEVEL 3</b><br/>Handling of raw proteins; preparation steps may include cooking, cooling, and/or reheating; baked goods containing custard.</p> <p><i>Examples:</i> Full service bars, grills, and restaurants; lasagna, sauce, refried beans, soup, fried rice, roast; meat loaf, tamales, and fried protein.</p>   |

| <b>ESTABLISHMENT TYPES &amp; DESCRIPTIONS</b>   |              |
|---|--------------|
| <p>Food establishments may have varying permit levels depending on type and complexity. Annual Fee amounts are listed.</p>  |              |
| <p><b>MULTIPLE EVENT (ITINERANT)</b><br/>Food service occurs only in conjunction with scheduled events (farmer's market, community festivals, etc.).</p> <p>Preparation of menu items must be done only in a CCPH permitted kitchen or on-site. The permitted kitchen must be used for all food and equipment storage, ware washing, and water supply. An Annual Commissary Agreement is required with a permitted kitchen.</p> <p>Limited menu. Foods must be prepared for immediate service or hot holding only. Cooling not allowed. Leftovers must be discarded daily.</p> <p>May cater events only with menu items that are reviewed and approved by CCPH.</p> |              |
| <b>Level 1</b>  | <b>\$235</b> |
| <b>Level 2</b>  | <b>\$516</b> |
| <b>Level 3</b>  | <b>\$845</b> |
| <b>BAKERY</b>   | <b>\$258</b> |
| Establishment retailing baked goods such as cakes, donuts, and breads.  |              |
| Higher complexity items (i.e. custard, quiche, pumpkin pies) are discouraged but considered on a case by case basis. Detailed description of preparation and cooling procedures are required for approved items with increased complexity.  |              |
| <b>BED &amp; BREAKFAST</b>  | <b>\$282</b> |
| Private home or inn offering 8 or less lodging units on a temporary basis to travelers. Offers only breakfast. Foods must be prepared for immediate service or hot holding only. No cooling. Leftovers must be discarded daily.   |              |

(Continued on back)

**ESTABLISHMENT TYPES & DESCRIPTIONS (Continued)**

|  |                  |
|--|------------------|
| <b>CATERER</b>   | <b>\$563</b>     |
| A person contracted to prepare food in an approved food establishment for final cooking or service at another location.  |                  |
| Permitted kitchen must be used for all food, equipment storage, ware washing, and water supply. <u>An Annual Commissary Agreement is required to use a separate business as a base of operation.</u>   |                  |
| <b>ESPRESSO/OTHER BEVERAGE</b>   | <b>\$235</b>     |
| Kiosk, tasting rooms, or other structure serving only beverages and pre-packaged foods. Annual Commissary Agreement may be required. Permitted kitchen must be used for all food, equipment storage, ware washing, and water supply. Permanent seating not provided. |                  |
| Approval of expanded menus are based upon provided facility infrastructure and evaluated on a case by case basis.  |                  |
| <b>GROCERY</b>   |                  |
| Establishment offering range of groceries including produce, dairy, and/or other packaged foods with cold holding requirements.  |                  |
| <b>Grocery Permit</b>  | <b>\$235</b>     |
| <b>w/Meat Market</b>   | <b>add \$235</b> |
| <b>w/Bakery</b>  | <b>add \$235</b> |
| <b>w/Deli</b>  | <b>add \$516</b> |
| <b>MEAT MARKET</b>   | <b>\$258</b>     |
| Retailing fresh, frozen, or cured proteins, poultry and fish. May be establishment in and of itself, or located within a grocery.  |                  |
| <b>MOBILE UNIT</b>   |                  |
| Readily movable, self-contained food establishment. Adequate hot & cold holding equipment, permanent hand washing stations, potable water, and waste water storage required.   |                  |
| Food storage, food preparation, equipment storage and ware washing needs will be evaluated on a case by case basis.  |                  |
| An Annual Commissary Agreement with a permitted kitchen is required for some or all of these activities.   |                  |
| <b>Level 1</b>   | <b>\$258</b>     |
| <b>Level 2</b>   | <b>\$563</b>     |
| <b>Level 3</b>   | <b>\$985</b>     |

|   |                |
|---|----------------|
| <b>PUBLIC KITCHEN</b>   | <b>\$258</b>   |
| A permitted kitchen where food is stored, prepared, portioned, or packaged for service to the public. May be rented to other groups to prepare food. Outside groups or businesses using a permitted public kitchen to prepare foods for service to the public must obtain their own annual or temporary permit.   |                |
| <u>Examples:</u> Church kitchens, kitchen designed for cooking classes or for rental purposes.  |                |
| <b>RESTAURANT</b>   |                |
| Food establishment within a permanent structure with all code identified facility requirements. Permitted restaurants may cater private events within approved complexity level. Fees based on complexity and annual gross revenue.   |                |
| <b>Level 1</b>  |                |
| <b>\$0-\$500K</b>   | <b>\$261</b>   |
| <b>\$501K - \$1M</b>  | <b>\$313</b>   |
| <b>\$1M+</b>  | <b>\$342</b>   |
| <b>Level 2</b>  |                |
| <b>\$0-\$500K</b>   | <b>\$519</b>   |
| <b>\$501K - \$1M</b>  | <b>\$618</b>   |
| <b>\$1M+</b>  | <b>\$670</b>   |
| <b>Level 3</b>  |                |
| <b>\$0-\$500K</b>   | <b>\$824</b>   |
| <b>\$501K - \$1M</b>  | <b>\$970</b>   |
| <b>\$1M+</b>  | <b>\$1,045</b> |
| <b>Manager Inspection Program</b>   | <b>\$340</b>   |
| <b>SEASONAL</b>   | <b>\$258</b>   |
| Establishment operating only on a seasonal basis (6 or fewer consecutive months a year) in a fixed location.  |                |
| <u>Examples:</u> concession stands, farmer's market, chef demo booths, holiday mall vendors.  |                |
| <b>TEMPORARY EVENT</b>  |                |
| Food service occurs only in conjunction with a scheduled event (fairs, community festivals, etc.) with limited menu. Preparation of menu items must be done only in an approved kitchen or on-site. The approved kitchen must be used for all food and equipment storage, ware washing, and water supply. Foods must be prepared for immediate service or hot holding only. Cooling not allowed. Leftovers must be discarded daily. |                |
| <b>1-3 Consecutive Days</b>   | <b>\$143</b>   |
| <b>4-21 Consecutive Days</b>  | <b>\$286</b>   |
| <b>Late fee</b>   | <b>\$47</b>    |
| <b>(if not permitted within 14 days of event)</b>   |                |

|   |                |
|---|----------------|
| <b>FOOD FOLLOW UP INSPECTION</b>  |                |
| <b>Mandatory Follow-up inspection</b>   | <b>\$375</b>   |
| Required if a routine inspection results in 20 or more red critical points.   |                |
| <b>Food Probation Inspection</b>  | <b>\$1,126</b> |
| Repeat critical violation(s) observed during the mandatory follow-up inspection results in Food Probation Inspections |                |
| <b>SCHOOLS</b>  |                |
| <b>New Construction</b>   | <b>\$587</b>   |
| <b>Remodel</b>  | <b>\$453</b>   |
| <b>Portable Addition</b>  | <b>\$251</b>   |
| <b>Cafeteria Public/Private</b>   | <b>\$563</b>   |
| <b>Permit Student Store</b>   | <b>\$235</b>   |
| <b>Summer School</b>  | <b>\$258</b>   |
| <b>Head Start</b>   | <b>\$282</b>   |
| <b>School Safety Inspection</b>   | <b>\$399</b>   |
| <b>OTHER FEES</b>   |                |
| <b>Add'l Services Food Program</b>  | <b>\$116</b>   |
| <b>Food Handler Card</b>  | <b>\$10</b>    |



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### FOOD WORKER TESTING INFORMATION

**TESTING IS AVAILABLE ON-LINE AT [www.foodworkercard.wa.gov](http://www.foodworkercard.wa.gov)**

**OR AT THE CLARK COUNTY PUBLIC HEALTH (CCPH) OFFICE**

All food workers must have a Washington State food worker card before starting work.

#### **CCPH TESTING DAYS & TIMES**

**WHEN:** Monday, Tuesday, Thursday & Friday:  
8:00 AM to 3:00 PM  
Wednesday — Special Needs - by  
appointment only

**WHERE:** Clark County Public Health  
1601 E. Fourth Plain Blvd. Third Floor  
For information call 397-8435.

**REGISTRATION:** Registration closes at 3:00 PM and test must be complete before 4:15 PM.

**Children are not allowed in the testing room and should not be left unattended in the waiting area.**

**FOR FIRST CARD :** Test can be taken on-line at [www.foodworkercard.wa.gov](http://www.foodworkercard.wa.gov) or at the CCPH office. The test on-line is the same test available at the CCPH office.

#### ***Taken at the CCPH office:***

- Bring picture identification.
- Register at the kiosk
- Watch video

- Take test
- Pay \$10.00 fee
- Card issued

#### ***Test taken on-line:***

- [www.foodworkercard.wa.gov](http://www.foodworkercard.wa.gov)
- Register
- Watch Video
- Take test
- Make payment: The cost of the class is \$10 and can be paid with VISA, MasterCard and debit cards with the VISA or MasterCard logo. Payment will be required after you have passed the test.
- Make sure you are connected to working printer for you will be printing your own card.
- Print card

#### ***On-line Information:***

- Be advised when your debit or credit billing statement arrives, charges for you food worker card will be listed under **“Tacoma-Pierce County Health Department.”**
- Turn off your pop-up blocker. The pop-up blocker can usually be found under Tools on your browser menu bar.
- Make sure you have the latest version of Adobe Flash on your computer. You can download Adobe Flash for free at <https://get.adobe.com/flashplayer>

**TO RENEW CARD:** If card is renewed *before* the expiration date on the card, a 3 year card can be issued at CCPH office only. The renewal period is **60 DAYS BEFORE** the card expires. Testing requirements are the same as if you were taking the test for the first time. Video must be reviewed and test taken everytime you renew your food worker card.

**RENEWING CARD FOR 5 YEARS:** Follow the procedure to renew a card. Bring proof an approved food safety program has been completed, such as the WSU PIC training or ServSafe, within the last 2 years.

**REPLACEMENT CARDS:** Food Worker Card can only be replaced if the card was issued after May 2011. Bring picture identification and a \$10.00 replacement fee will apply.

**SPECIAL NEEDS TESTING:** Call 397-8428, Ext. 7249 for information and scheduling.

MANUAL AND TEST OFFERED IN ENGLISH, CAMBODIAN, CANTONESE, KOREAN, MANDARIN, RUSSIAN, SPANISH, VIETNAMESE and CLOSED CAPTION.

Testing Information 01202012.doc



For other formats, contact the Clark County ADA Office: **Voice** (360) 397-2000;  
**Relay** 711 or (800) 833-6388; **Fax** (360) 397-6165; **E-mail** ADA@clark.wa.gov.