Kankakee County Health Department/Division of Environmental Health
2390 E. Station, Kankakee, IL 60901
(815) 802-9410

PRIOR APPROVAL INFORMATION SHEET

Name of Vendor_____ Street Address _____ Telephone No._____

Vendor: Non-potentially hazardous foods ____Y/N **Other** Temporary Food Stand _____ Mobile Food Unit _____

Please fill in anything that applies to your type of foods:

TYPES OF FOODS TO BE SOLD OR PREPARED	PRE-PACKAGED?		SOURCE Where Prepared or Bought	LABELED?	INGREDIENTS	FEE REQRD.
	YES	NO				

Where stored: _____ Transported how:_____ Displayed: _____