



BRIGHT FROM THE START

Georgia Department of Early Care and Learning: Nutrition Services

2 Martin Luther King Jr. Drive, SE, Suite 754, East Tower, Atlanta, Georgia 30334

(404) 656-5957

Food Service Permit Inquiry Form
Child and Adult Care Food Program (CACFP) and Happy Helpings (HH)

The purpose of this form is to assist CACFP institutions and HH sponsors with determining food service permit requirements for non-licensed Program facilities based on the type of meal service operation. Please be sure to complete all sections below and either upload this form to GA ATLAS or email a copy to your assigned Nutrition Services Application Specialist.

When requesting an evaluation to determine whether a food service permit is required from your local Health Authority, CACFP institutions and HH sponsors must:

1. Provide a copy of this form to the local Health Authority for review along with:
 - a copy of a sample menu for each meal type being served during Program operations; and
 - a copy of a receipt/invoice/purchase order of vended meals purchased (for institutions or sponsors purchasing meals from a food service management company or food distributor).
2. Ensure the form has been authorized (signed and dated) by the institution’s program contact/authorized representative AND the local health department prior to submission to DECAL.

Program(s): CACFP/HH Agreement Number: _____
(HH Program Operation Begin Date: _____ Program Operation End Date: _____)

Organization Name: _____

Address: _____

City: _____ State: _____ County: _____ Zip: _____

Name of Program Contact/Authorized Representative: _____

Contact Number: _____

Email Address: _____

Institutions/sponsors completing this form must fall under **one or more** of the following categories. However, **School Food Authorities (SFAs)** are exempt from this process. Please select *all* that apply:

- Institution/Sponsor Type:**
- Private Non-Profit Organization
 - Church/Church Affiliates
 - At-risk Afterschool Program
- Program/M Meal Service Description:**
- Vended (meal preparation is outsourced)
 - Self-Prep (meals prepared in central kitchen and/or site)
 - Both (Vended and Self-Prep)

Instructions: Please answer the question below and then select the item that best describes your meal service.

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Where is your food prepared, cooked, or otherwise manipulated?

At a Food Service Management Company (FSMC)/Third Party Location

Item #	Description
1.	<input type="checkbox"/> Fully cooked, complete unitized meals or snacks are <u>purchased and prepared by a food service management company/third party</u> (e.g., caterer, restaurant, school, etc.) and are picked-up or delivered to each CACFP facility or HH site ready to consume. <i>[Copy of Food Service Permit from food service management company/third party location is required.]</i>

At the Sponsor's Central Kitchen/Location

Item #	Description
2.	<input type="checkbox"/> Pre-packaged/self-contained food items are purchased ¹ from a food service management company, food distributor, or supermarket and are combined, cooked, and/or prepared by the sponsor's staff at a central kitchen/location to create a unitized meal or snack. The complete meals or snacks are then delivered to each CACFP or HH site ready to consume. <i>[Requires a Food Service Permit in the name of the sponsoring organization for the central kitchen/location where the food is being manipulated].</i>

At a Third-Party Central Kitchen/Location

Item #	Description
3.	<input type="checkbox"/> Pre-packaged/self-contained food items are <u>purchased¹ by the sponsor</u> . The food is then combined, cooked, and/or prepared by a food service management company/third party (e.g., caterer, restaurant, school, etc.) to create a unitized meal or snack. The complete meals or snacks are then picked up or delivered to each CACFP or HH site ready to consume. <i>[Copy of Food Service Permit from food service management company/third party location is required.]</i>

At the CACFP/HH Site Where Participants are Served

Item #	Description
4.	<input type="checkbox"/> Pre-packaged/self-contained food items are purchased ¹ from a food service management company, food distributor, or supermarket and are combined, cooked, and/or prepared at the physical CACFP or HH site. <i>[Requires a Food Service Permit in the name of the sponsoring organization for the site that is manipulating the food].</i>

¹All food products will be obtained from sources that are under inspection of the authority having jurisdiction or otherwise approved by the Health Authority except for fresh produce. Fresh produce may be obtained from local sources. A Cottage License Industry is not considered an approved source for a foodservice establishment. The source from where the food is purchased must have a wholesale license (unless it is fresh produce that is purchased). Sources of packaged food must be labeled in accordance with law. Food shall be kept at proper the temperature during transport to the foodservice establishment and received at the proper temperature at the foodservice establishment.



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At Multiple Locations

Item #	Description
5.	<input type="checkbox"/> Complete meals or individual food items are purchased from a food service management company/third party and are then delivered to each CACFP or HH site. The meals or food items are further manipulated ² at the CACFP or HH site. <i>If a FSMC employee³ from the permitted food service management company/third party remains on site to cook, prepare, and/or plate the food, the only required form of documentation would be the Food Service Permit from the food service management company/third party.</i> <i>However, if meals are instead cooked, prepared, and/or plated by CACFP/HH meal service operators/kitchen staff, a Food Service Permit is required for the food service management company/third party AND for the CACFP or HH feeding site.</i>

6.	<input type="checkbox"/> Complete meals or individual food items are combined, cooked, and/or prepared at a central kitchen ¹ for which the sponsor holds a food service permit and then delivered to each CACFP or HH site. The meals or food items are further manipulated ³ at the CACFP or HH site. <i>[If the sponsor submits written documentation stating that the individuals working at the CACFP or HH site are employees or volunteers for the sponsor's food service program and are working under the supervision and active managerial control of the food service permit holder of the central kitchen, the site would not need a separate food service permit for the site. In these instances, the food service permit for the central kitchen must be posted at the site.</i> <i>If these conditions are not met and the food prepared at the central kitchen is further manipulated at the site, the site must have a food service permit in the name of the sponsoring organization.</i>
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No Manipulation of Food

Item #	Description
7.	<input type="checkbox"/> Meals are received/served pre-packaged and ready to consume to CACFP/HH participants. Pre-packaged food items, complete meals served as a single packaged unit, or ready to eat fruits/vegetables (e.g., apples, oranges, bananas) go directly to the CACFP/HH participants for opening and consumption. Pre-packaged meals and food items are not opened or manipulated ² in any way by the food service operators/kitchen staff before consumption. <i>[A Food Service Permit is not required.]</i>

Note: If other is selected, sponsors must still provide a copy of this form to the local health authority for review.

Other (Please explain) _____

² Manipulation of meals and/or food is defined as unpacking, plating, heating, etc. Heating is referred to instances where food is placed in warmers or similar use containers for the intent of reheating or hot holding meals and/or food.

³ "FSMC Employee" means the permit holder, person in charge, food employee, person having supervisory or management duties, person on the payroll, family member, volunteer, person performing work under contractual agreement, or other person working in a food service establishment.



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Certification Statement:

I certify that the information contained in this entire document is true and correct to the best of my ability and that intentionally listing false or inaccurate information and/or failure to notify DECAL when the information contained in this document changes, may result in the denial of a claim(s) for reimbursement and/or termination and disqualification of the organization, its responsible principals and/or individuals from participation the CACFP, HH, or any other Child Nutrition Program (CNP).

Signature of Delegated Principal

Date of Submission

For Local Health Department Use Only:
 Food Service Permit is: Required Not Required
 Food Service Permit will be issued by the Local Health Department: Yes No
(If "No" but a permit is required based on criteria from pages 2 & 3, the applicant must provide evidence of a food service permit issued by the Health Department/Authority with jurisdiction upon request by this local Health Authority.)
 Item Number(s) _____ have been selected and are applicable to this CACFP Institution and/or HH Sponsor.
 Name of Health Department Official _____ Department/**County** _____
 Health Department Official Signature _____ Date _____



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In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotope, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

2. fax:

(833) 256-1665 or (202) 690-7442; or

3. email:

program.intake@usda.gov

This institution is an equal opportunity provider.