



Retail Food Establishment Change of Owner **Application Packet**

Thank you for your interest in becoming a new operator of a retail food establishment. In this packet, you will find all of the necessary paperwork and helpful documents that you will need in order to obtain approval for your new facility. Each document is explained in detail below. Feel free to contact our office if you have further questions.

- **GUIDELINES FOR CHANGE OF OWNER/OPERATOR OF FOOD ESTABLISHMENTS**
Establishments that undergo a change of ownership are required to obtain a 90-day probationary food permit for the business. During the 90-day probationary period, the retail food establishment must meet all current requirements set forth in the Indiana Food Code (410 IAC 7-24).
- **RETAIL FOOD ESTABLISHMENT PERMIT APPLICATION**
Since food service permits are not transferable from person to person, the new operator of a retail food establishment must submit an application for a food permit and pay all applicable fees. The application type will depend on the type of food service provided. For example, an Annual Food Service permit application is typically for restaurants, where an Annual Food Market permit application is typically for grocery stores and markets. Once the establishment type is determined, the appropriate application will be provided.
- **FOOD ESTABLISHMENT SIGN-OFF SHEET**
All retail food establishments must be in compliance with current Fort Wayne/Allen County Building, Fire and Zoning regulations. It is the responsibility of the operator to contact the Allen County Building Department, the Fort Wayne Fire Department (or other appropriate fire department based upon location of facility) and the Fort Wayne-Allen County Department of Planning Services to schedule any necessary inspections and/or obtain signatures for approval. This sheet is to be submitted to the Department of Health once all signatures have been obtained (and must be submitted in completed form prior to final inspection by the Department of Health).
- **LIST OF CERTIFIED FOOD HANDLER PROVIDERS**
410 IAC 7-24-118 requires that retail food establishments (unless otherwise exempted) have at least one certified food handler who has demonstrated knowledge of food safety principles by passing a test that is part of an accredited program. This document provides a list of providers that meet the requirements as required by the Indiana State Department of Health Certification of Food Handler Requirements (410 IAC 7-22).



Guidelines for Change of Owner/Operator of Food Establishments

NOTE: Food Establishment Permits are NOT transferable from one owner of an establishment to another. The new permittee taking over a continuously operating food establishment must obtain a 90-day probationary food permit for the business. In order to qualify for a new annual food permit (at the end of the 90-day probationary period), the establishment must meet all current Food Code requirements. The procedure to obtain a proper permit is outlined below.

1. **CONTACT FIRE AND BUILDING DEPARTMENTS.** All food establishments must be in compliance with current Fire and Building Codes. Contact the applicable departments using the contact information on the reverse side of this form for their requirements and approval.
2. **CONTACT THE ALLEN COUNTY DEPARTMENT OF HEALTH.** Prior to the actual change of ownership, call our Department to inform us of the impending transaction. We can be reached at 260-449-7562, Monday through Friday from 8:00 am to 4:30 pm.
3. **SCHEDULE A PRELIMINARY INSPECTION OF THE ESTABLISHMENT.** Make an appointment with the appropriate inspector to have them conduct a change of ownership inspection of the establishment. Allow at least two working days for scheduling. It is recommended that this inspection be conducted prior to the ownership change with both the present and future owners in attendance. The inspection report will list all items that must be corrected to bring the establishment into compliance with current Food Code Requirements.
4. **SUBMIT PLANS, IF APPLICABLE.** If the establishment is to undergo remodeling/additions, plans must be submitted prior to construction to this Department for review. (See “Plan Content Requirements” for content and specific requirements for submitted plans). At that time, a Plan Receipt will be issued, which will allow your contractor to obtain necessary Building Permits. ***Failure to submit plans before construction commences may result in the issuance of an immediate stop work order and the assessment of a fine. Work will not be allowed to resume until plans have been submitted and the fine has been paid.***
5. **OBTAIN A 90-DAY PROBATIONARY PERMIT.** Submit a completed permit application and all applicable fees for a 90-day probationary permit to the Health Department. **Note:** The permit must be applied for PRIOR to change of ownership to avoid penalty fees. Once the Health Department has received the application and fees, a 90-day Probationary Permit will be issued. The establishment has 90 days to come into compliance with all of the Food Code requirements as noted on the preliminary inspection. **Note:** Fees must be submitted to the Health Department in person or by mail as no fees may be received in the field.
6. **SCHEDULE FINAL APPROVAL INSPECTION.** Make all required corrections prior to the expiration of the 90-day Probationary Permit. An inspection will be conducted the day following the permit expiration date (or so), unless the owner calls to schedule an earlier day. Allow at least two working days for scheduling. If all corrections are completed, the establishment will be approved for an annual food establishment permit. ***If all corrections are not completed, the establishment may be closed immediately.***

BUILDING AND FIRE DEPARTMENT CONTACT INFORMATION ALLEN COUNTY- VOLUNTEER DEPARTMENTS



Allen County Department of Health

(260) 449-7561

Allen County Building Department

Commercial Building Inspector - (260) 449-7546

Allen County Department of Planning Services

(260) 449-7607

Community & Economic Development (Zoning)

(260) 427-1129

FIRE DEPARTMENT INFORMATION:

FORT WAYNE FIRE DEPARTMENT (within city limits)

Dial 3-1-1

ABOITE TWP FIRE DEPT #1

11321 Aboite Ctr Rd – Fort Wayne, IN 46814 – (260) 436-1449

ARCOLA FIRE DEPT

PO Box 122 – Arcola, IN 46704 – (260) 625-3474

HOAGLAND FIRE DEPT

11316 Hoagland Rd – Hoagland, IN 46745 – (260) 639-6161

HUNTERTOWN FIRE DEPT

15412 Lima Rd – Hometown, IN 46748 – (260) 449-3696

MONROEVILLE FIRE DEPT

205 W South St – Monroeville, IN 46797 – (260) 623-6234

NEW HAVEN-ADAMS FIRE DEPT

910 Hartzell Rd – New Haven, IN 46774 – (260) 493-7500

NORTHEAST FIRE & EMS DISTRICT

15226 Tonkel Rd – Leo, IN 46765 – (260) 627-2272

Box 428 – Grabill, IN 46741 – (260) 627-5133

POE FIRE DEPT

3619 Yoder Rd – Fort Wayne, IN 46819 – (260) 639-3992

ST JOE TOWNSHIP FIRE DEPT

6033 Maplecrest Rd – Fort Wayne, IN 46815 – (260) 485-5612

(Unincorporated St. Joe Twp., & portions of Milan Twp.)

SOUTHWEST ALLEN CO FIRE DIST

12912 Indianapolis Rd – Yoder, IN 46798 - (260) 747-7786

WASHINGTON TWP FIRE DEPT

1834 W Wallen Rd – Fort Wayne, IN 46818 – (260) 449-3671

WOODBURN FIRE DEPT

22371 Main St – Woodburn, IN 46797 – (260) 632-5218

Guidelines for Change of Owner/Operator of Food Establishments 7-37

Rev.4-5-21 SS MRW-MRH



Food Protection Division ♦ 200 E. Berry Street, Suite 360 ♦ Fort Wayne, IN 46802

Phone: (260) 449-7562 ♦ Fax: (260) 449-3010 ♦ www.allencountyhealth.com

ANNUAL FOOD SERVICE PERMIT APPLICATION

All Food Establishments must comply with 410 IAC 7-24 and Allen County Code, Title 10, Article 2 at all times or be subject to the penalties therein.

NAME OF ESTABLISHMENT: _____
(this is how it will appear on your permit and in our files)

Address of Establishment (location): _____
(street) (city) (zip)

Mailing Address for Permit: _____
(street) (city) (state) (zip)

Mailing Address for permit renewal letter: _____
(street) (city) (state) (zip)

Establishment Phone: _____ Fax: _____ E-Mail: _____

Name of Owner: _____ Owner Address: _____

Type of Ownership (* see back) ___ Individual ___ Partnership ___ Corporation ___ LLC ___ Other: _____

If corporation, list name: _____ Resident Agent: _____

-- THE FOLLOWING ISSUES MUST BE ADDRESSED/COMPLETED OR PERMIT WILL NOT BE ISSUED --

- (1) Total number of Employees: _____ (including owners, managers and staff in food service/preparation capacity)
- (2) Name of the Person-In-Charge: _____ Position: _____
- (3) Name of Certified Food Handler: _____ Position: _____ Cert. Expiration: _____
(In accordance with 410 IAC 7-22, each food establishment must employ a certified food handler as of 1/1/05 unless otherwise exempt.)
- (4) List the days and hours of operation (be specific): _____
- (5) Type of Water Supply to the Establishment: _____ Municipal _____ Private (well)

PERMIT FEE SCHEDULE *(This is a non-refundable fee.)*

LATE FEES APPLY IF THE PAYMENT IS BEING MADE AFTER THE 15TH OF THE MONTH IT IS DUE. IF LATE, USE CHART ON RIGHT.

ON-TIME RENEWALS, use the chart below

LATE RENEWALS, use the chart below

TOTAL EMPLOYEES

FEE

TOTAL EMPLOYEES

TOTAL FEE

1-5	\$250.00
6-9	\$375.00
10-40	\$425.00
41 and over	\$475.00
SCHOOLS	\$ 55.00

1-5	\$ 312.50
6-9	\$ 468.75
10-40	\$ 531.25
41 and over	\$ 593.75
SCHOOLS	\$ 68.75

\$ _____

NEW ESTABLISHMENTS & CHANGES OF OWNERSHIP, SEE BACK OF APPLICATION FOR FEE SCHEDULE

Make all checks or money orders payable to the Allen County Department of Health.

NOTE #1: This permit is solely for the facility located at the address listed above. Any sale and/or food preparation at an off-site event is beyond the definition of catering and is not in compliance with state law/local ordinance and subject to penalties.

NOTE #2: Payments made by check that result in non-sufficient funds will result in the requirement for immediate payment to the Allen County Department of Health (plus an additional NSF check fee) via cash, money order or certified check within 5 business days. If payment is not received within 5 business days of notification, the establishment will be closed until fees are paid in full.

NOTE #3 (Collections): Any and all charges for services and permits are your sole responsibility and are to be paid in full upon application. In the event any legal proceeding must be instituted to recover the amount due, the Allen County Department of Health shall be entitled to recover the cost of the collections, including reasonable attorney fees.

By signing below I agree to ALL terms and conditions listed on this permit application

Permit will not be issued if not properly signed!

Signature of Applicant(s) or Corporate Officer: _____

Must be signed in ink by applicant(s)

Printed Name of Applicant(s): _____

-----FOR OFFICE USE ONLY BELOW THIS LINE-----

Signature of Food Division Representative _____

Date _____

District #: _____ Receipt Number: _____

Estab. #: _____ Permit #: _____

Date Entered: _____ Clerk: _____

***ESTABLISHMENTS WITH SHARED OWNERSHIP, A PARTNERSHIP, OR ANY FORM OF MULTIPLE OWNERSHIP OR MEMBERSHIP – please complete the following for each:**

Owner Name: _____ Telephone: _____ Ownership %: _____

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NOTE TO NEW ESTABLISHMENTS OR NEW OPERATORS -- Non-Probationary

New Establishment Fee: \$275.00

Each new food establishment shall be required to pay a fee of two hundred and seventy five dollars (\$275.00) for the review of plans and specifications and for the initial inspection of the Food Establishment. This fee is in addition to the permit fee.

NOTE TO NEW OPERATORS -- (90-day Probationary) Fee: \$150.00

Each new permittee of a food establishment which is in existence and has been operating on a continual basis up to the time that the new permittee takes over the ownership or possession of said food establishment, shall be required to pay a fee of one hundred and fifty dollars (\$150.00) for the initial inspection of the food establishment. This is an addition to the permit fee as set out herein.

(Food establishments under new ownership are required to meet all applicable current codes within 90 days.) There will be no extensions on this 90-day probationary period. All codes must be met at the time for the annual permit to be issued. If codes are not met at that time, the probationary permit will be revoked and the establishment will be closed. Refer to Title 10, Article 2 (Food and Beverage Ordinance) for further information.

New Operator: I, _____, have read and understand the
(Please sign)

above paragraph and I also understand I will need to schedule an initial inspection of the facility to determine what needs to be done to meet all applicable requirements.

Actual date that the change of ownership will become effective: _____



Food Protection Division ♦ 200 E. Berry Street, Suite 360 ♦ Fort Wayne, IN 46802

Phone: (260) 449-7562 ♦ Fax: (260) 449-3010 ♦ www.allencountyhealth.com

ANNUAL FOOD MARKET PERMIT APPLICATION

All Food Establishments must comply with 410 IAC 7-24 and Allen County Code, Title 10, Article 2 at all times or be subject to the penalties therein

NAME OF ESTABLISHMENT: _____
(this is how it will appear on your permit and in our files)

Address of Establishment (location): _____
(street) (city) (zip)

Mailing Address for Permit: _____
(street) (city) (state) (zip)

Mailing Address for permit renewal letter: _____
(street) (city) (state) (zip)

Establishment Phone: _____ Fax: _____ E-Mail: _____

Name of Owner: _____ Owner Address: _____

Type of Ownership (* see back) Individual Partnership Corporation LLC Other: _____

If corporation, list name: _____ Resident Agent: _____

-- THE FOLLOWING QUESTIONS MUST BE ANSWERED OR PERMIT WILL NOT BE ISSUED --

- (1) Square footage of the food market area (only where food is stored, handled, displayed or sold): _____
- (2) What is the name of the Person-In-Charge? _____ Position: _____
- (3) Name of Certified Food Handler? _____ Position: _____ Cert. Expiration: _____
(In accordance with 410 IAC 7-22, each food establishment must employ a certified food handler as of 1/1/05 unless otherwise exempt.)
- (4) Please list your days and hours of operation (be specific): _____
- (5) Type of Water Supply to the Establishment: Municipal Private (well) (6) Number of Employees: _____

PERMIT FEE SCHEDULE *(This is a non-refundable fee.)*

LATE FEES APPLY IF THE PAYMENT IS BEING MADE AFTER THE 15TH OF THE MONTH IT IS DUE. IF LATE, USE CHART ON RIGHT.

ON-TIME RENEWALS, use the chart below

SQUARE FOOTAGE	TOTAL FEE
Under 3,000	\$225.00
3,001-30,000	\$450.00
30,001-40,000	\$625.00
40,001-60,000	\$835.00
60,001 and over	\$1,050.00

LATE RENEWALS, use the chart below

SQUARE FOOTAGE	TOTAL FEE
Under 3,000	\$281.25
3,001-30,000	\$562.50
30,001-40,000	\$781.25
40,001-60,000	\$1,043.75
60,001 and over	\$1,312.50

\$ _____

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By signing below I agree to ALL terms and conditions listed on this permit application

Permit will not be issued if not properly signed!

Signature of Applicant(s) or Corporate Officer: _____

Must be signed in ink by applicant(s)

Printed Name of Applicant(s): _____

-----FOR OFFICE USE ONLY BELOW THIS LINE-----

Signature of Food Division Representative _____

Date _____

District #: _____ Receipt Number: _____

Estab. #: _____ Permit #: _____

Date Entered: _____ Clerk: _____

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Food Establishment Sign-Off Sheet

THIS FORM MUST BE SIGNED BY ALL APPLICABLE DEPARTMENTS AND THE ORIGINAL DOCUMENT (NO COPIES) MUST BE RETURNED TO THE DEPARTMENT OF HEALTH BEFORE ANY FOOD ESTABLISHMENT OPERATIONAL PERMITS CAN BE ISSUED.

___ New Establishment ___ New Operator ___ Probationary ___ Remodel/Fire ___ Other: _____

NAME OF ESTABLISHMENT _____

OPERATING ADDRESS _____

Type of Establishment:

___ Permanent ___ Mobile/trailer ___ Off-Site Outdoor Grilling ___ Other: _____

Operation Information:

of days/month or months/year _____ At what location(s): _____

Structural Information:

___ Permanent Building ___ Trailer ___ Tent ___ Other(please list) _____

OWNED BY _____ PHONE _____

OPERATED/MANAGED BY _____ PHONE _____

Allen County Code, Title 10, Article 2 (Allen County Food and Beverage Ordinance) states: "All Food Establishments must fully comply at all times with all local and state Building, Zoning and Fire codes." Therefore, the following departments are required to approve this establishment under their respective rules and regulations before a food establishment permit can be issued by the Department of Health.

The applicant is required to contact the Allen County Building Department for approval between the hours of 8:00a.m. to 4:30p.m (SEE BACK). Applicants should allow sufficient time for approval, as an inspection may be required by the Bldg. Dept.

Will any new equipment be installed? ___ Yes ___ No If yes, what: _____

APPROVED BY BUILDING DEPARTMENT _____ DATE _____

Comments _____

Note: The Allen County Building Department must be contacted as soon as possible to discuss the requirements regarding any ventilation hood system. A new air balance test is required when any construction takes place or when any hood modifications occur. Further, if there is a change of ownership (even with no building/hood modifications), a new air balance test is required if one has not been performed during the past 12 months. The new owner is responsible for working with the Building Department to either provide documentation of a valid/accepted air balance report or obtaining a new air balance test if required.

APPROVED BY FIRE INSPECTOR _____ DATE _____

Comments _____

This section below must be completed if the establishment is going through a change of ownership, conducting remodeling, or for establishments for which plans will not be going through a traditional plan review "routing" process. Obtain the appropriate signature below based on the location of the property/business. Additionally, a signature must be obtained from the appropriate Water Pollution Control authority (Fort Wayne City Utilities Development Services or Aqua Indiana) to ensure compliance with all applicable codes and regulations.

___ Approved ___ Not Approved **Dept. of Planning Services** _____ DATE _____

___ Approved ___ Not Approved **Leo-Cedarville Planning District** _____ DATE _____

___ Approved ___ Not Approved **New Haven Planning Department** _____ DATE _____

Comments (from applicable Planning Dept.) _____

___ Approved ___ Not Approved **Fort Wayne City Utilities** _____ DATE _____

___ Approved ___ Not Approved **Aqua Indiana** _____ DATE _____

Comments (from applicable Water Pollution Control) _____

Helpful Telephone Numbers and Department Information

Building Department

Allen County Building Department (260) 449-7131
1st Floor – Citizens Square Building 200 E. Berry St., Ste 180

*Applicants should contact the Building Department office regarding any needs regarding this form.
The Building Department will decide if an inspection is needed and arrange the scheduled inspection.*

Planning and Zoning

Allen County Department of Planning Services (260) 449-7607
1st Floor – Citizens Square Building, Ste 150

Leo-Cedarville Planning District (260) 627-6321

New Haven Planning Department (260) 748-7040

Water Pollution Control

Fort Wayne City Utilities Development Services (260) 427-5064
2nd Floor – Citizens Square Building, Room 250

Aqua Indiana (260) 625-4700
1111 W. Hamilton Rd. South

Fire Departments

Fort Wayne Fire Code Enforcement Dial 3-1-1
Aboite Twp Fire Dept. # 1 (260) 436-1449
Arcola Fire Dept. (260) 625-3474
Northeast Fire & EMS District--Leo (260) 627-2272
Northeast Fire & EMS District--Grabill (260) 627-5133
Hoagland Fire Dept. (260) 639-6161
Huntertown Fire Dept. (260) 449-3696
Monroeville Fire Dept. (260) 623-6234
New Haven-Adams Fire Dept. (260) 493-7500
Poe Fire Dept. (260) 639-3992
St. Joe Twp Fire Dept. (260) 485-5612
Southwest Allen Co. Fire Dept. (260) 747-7786
Washington Two Fire Dept. (260) 449-3671
Woodburn Fire Dept. (260) 632-5218

ADDITIONAL COMMENTS:

Department Name:

Department Name:

Food Handler Certification Examination and Training Program Providers

The following organizations offer nationally accredited food safety certification programs and examinations utilizing the Conference for Food Protection standards. This list is subject to change as additional programs are accredited or discredited by the standards set forth by the American National Standard Institute (ANSI).

<p>Certified Professional Food Manager® Thomson Prometric (formerly Experior Assessments, LLC) 1360 Energy Park Drive St. Paul, MN 55108 Phone: 1-800-786-3926 Fax: 1-800-247-9362 Internet: www.experioronline.com Certification lasts for 5 years</p>	<p>Food Safety Manager Certification Examination The National Registry of Food Safety Professionals 5728 Major Blvd., Suite 750 Orlando, FL 32819 Phone: 1-800-446-0257 Internet: Info@nrfsp.com Certification lasts for 5 years</p>	<p>ServSafe® Indiana Restaurant and Hospitality Association 200 South Meridian Street, Suite 350 Indianapolis, IN 46225 Contact: Debbie Scott Phone: 1-800-678-1957 Internet: www.indianarestaurants.org Certification lasts for 5 years</p>
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The following organizations offer training programs and one or more of the approved examinations from the aforementioned accredited testing organizations:

<p>Safe Food Handlers Corporation 665 South Farmingdale Road New Berlin, Illinois 62670 PH: 888-793-5136 FAX: 217-793-5163 Internet: www.sfhcorp.com Email: sfhcorp@aol.com Contact: Ron Thomas, Director of Marketing and Education Using ServSafe® exam</p>	<p>EcoSure, a service of Ecolab 60 Revere Drive, Suite 800 Northbrook, IL 60062 PH: (847) 480-9898 FAX: (847) 480-1838 Contact: Dave Schoen Email: dave.schoen@ecolab.com Internet: www.ecosure.com Using the ServSafe® exam</p>
<p>Allen County Extension Office 4001 Crescent Ave. Ft. Wayne, IN 46815 PH: (260) 481-6826 Using course and examination from ServSafe®</p>	<p>Indiana School Food Service Association SFS Division, SFS Serves P.O. Box 702 Mishawaka, IN 46546 Contact: Michael Miller PH: (800) 348-0823 FAX: (574) 257-0895 Internet: www.sfsserves.com Email: Michael@sfsserves.com Using the ServSafe® exam</p>
<p>SuperSafeMark® Food Marketing Institute 655 15th Street, NW Washington, D.C. 20005 Contact: Laurie Williams PH: (202) 220-0660 Internet: www.supersafemark.com Using the National Registry exam</p>	<p>NEHA Training LLC 720 S. Colorado Blvd., Ste 900-S Denver, CO 80246 PH: (303) 756-9090, ext. 347 FAX: (303) 691-9490 Internet: www.nehatraining.com Contact: Shawn Sheridan, Program Coordinator Using examination from National Registry of Food Professionals</p>
<p>Purdue University Department of Food Science Food Science Building 745 Agriculture Mall Dr. West Lafayette, IN 47907-2009 Contact: Ann Guentert PH: (765) 496-3827 Internet: www.foodsci.purdue.edu/outreach/retailfoodsafety/ Using the National Registry exam</p>	<p>Indiana Licensed Beverage Association Food Handling Certification 47 South Pennsylvania Street, Suite 702 Indianapolis, IN 46204 PH: (800) 843-5288 Contact: Kimberly Blakely Email: kblakeley@indianalba.com Internet: www.indianalba.com Using the National Registry exam</p>

<p>Danger Zone Consulting 14565 Cherry Tree Rd. Carmel, IN 46033 PH: (317) 571-8026 Internet: dangerzone41-140@prodigy.net Contact: Melissa Ackerman Using the ServSafe® or National Registry exam</p>	<p>Food Safety Training 848 Executive Drive Oviedo, FL 32765 PH: (800)232-1917 Contact: John Burgos Cell phone: (800) 406-2334 Email: jburgos@foodsafetyusa.com Using the Exporior Assessments exam</p>
<p>HP Product 4220 Saguaro Trail Indianapolis, IN 46268 PH: (317) 298-9950 ext. 132 PH: (800) 382-5326 Contact: James F. Krohn Email: jkrohn@sales.hpproducts.com Using the National Registry exam</p>	<p>Kentucky Food Safety Consulting P.O. Box 7535 Louisville, KY 40257-0535 PH: (502) 552-2204 Contact: Mark S. Ohlmann, CFSP Email: kyfoodsafety@msn.com Using NEHA Trainings Food Safety program and using the National Registry exam</p>
<p>MD Consulting P.O. Box 133 West Boylston, MA 01583 PH: (508) 835-9898 Contact: Sam Wong, PhD Email: mdconsulting@charter.net Using the ServSafe® exam. Teaches in Chinese language</p>	<p>IVY Tech State College- Region 5 1942 E. North Street Kokomo, IN 46903-1373 PH: (765) 454-5112 ext 704 PH: (866) 454-5742 ext 704 FAX: (765) 454-5126 Contact: Janice Hulet, CCES Coordinator Email: jhulet@ivytech.edu</p>
<p>Indiana University-Purdue University at Indianapolis Tourism, Conventions, and Event Management Dept. 901 West New York Street Indianapolis, IN 46202 PH: (317) 274-0810 Contact: Jim Bennett Email: jbennett@iupui.edu Using the ServSafe® exam</p>	<p>NSF International, Inc. Center for Public Health Education 789 Dixboro Road Ann arbor, MI 48105 PH: 800/NSF-MARK Internet: www.nsf.org Email: hazan@nsf.org Contact: Stan Hazan Using all of the ANSI approved examinations</p>
<p>IVY Tech State College- Region 8 1 West 26th Street Indianapolis, IN 46208 PH: (317) 921-4808 Contact: Sally Eisbrenner, CCES Coordinator Email: seisbren@ivytech.edu</p>	<p>Shamrock Food Safety Education & Consulting 254 Pleasant Dr. Elk Grove Village, IL 60007 PH: (219) 714-7647 Contact: Shane Sexton Email: shamrockfoods@yahoo.com Using the National Registry exam</p>
<p>SES 5750 Castle Creek Parkway, Suite 314 Indianapolis, IN 46250 PH: (877) 882-1925 FAX: (317) 334-1998 Internet: www.SESadvantage.com Contact: Melissa Using the ServSafe® exam</p>	
<p>Vincennes University 1002 N. 1st Street, GVH 72 Vincennes, IN 47591 PH: (812) 888-5743 Contact: Lori Marchino Email: lorimarchino@aol.com Using the ServSafe® exam</p>	