



Frequently Asked Questions on Permit Fees

1. Why is there an increase in my annual public health permit fee?

Public health permit fees were adjusted this year to cover the full cost of the inspections provided. The cost includes time to conduct an inspection, as well as the number of times per year a facility is inspected. For example, the permit fees for restaurants and food markets were adjusted based on food safety risk and size of the facility. "Higher risk" facilities receive three inspections per year, while "lower risk" facilities receive one inspection per year. Aligning fees to the actual costs to perform these inspections results in higher permit fees for some owners and lower fees for others.

2. Were permit holders notified of the proposed increase?

Notification regarding the proposed fee changes was posted on the DPH/Environmental Health website and mailed to all permit holders. During April-July 2011, the Department also held public meetings, as well as several meetings with representatives from industries, to provide notification and receive comments.

3. How were public health permit fees determined?

The Department hired an independent consultant to complete a comprehensive study to determine the actual costs to perform each service. The costs included the time to conduct the service, such as a restaurant inspection, and the number of times per year that the service was conducted. This alignment resulted in an increase in some fees, and a decrease in others.

4. Why doesn't the Department cut costs instead of raising our fees?

The last public health permit fee increase was in 2007. The Department is increasing existing fees only to the extent necessary to offset actual costs and is working with industry and program managers to identify further cost reduction efficiencies.

5. When did the public health permit fee increase go into effect?

The fees became effective September 1, 2011, for the annual billing period of July 1, 2011 through June 30, 2012.



6. Can I pay the public health permit fee in installments?

No, the entire license/permit fee needs to be paid in full by the due date or a 25% penalty is assessed.

7. Will I be charged a late fee since my permit expired in June?

No, as long as the payment is received by the due date stated on your September 2011 billing statement.

8. Do public health permit fees increase every year?

No. The last time the Department raised fees was in 2007.

9. My restaurant always receives the grade "A". Why should I be inspected three times a year and charged for each of these inspections?

The permit categories for restaurants and retail food markets are based primarily on *risk* and secondarily on *size*, not on the last grade received. The department is evaluating, in consultation with the food industry, the feasibility of adjusting the annual inspection frequency based on compliance history.

10. What are the risk categories for restaurants and markets?

There are 3 risk categories for restaurants and markets. They are "lower", "moderate", and "higher" risk. The permit categories for facilities are based primarily on the risk categories.

"Lower risk " restaurants and markets handle foods which are generally pre-packaged, ready to eat, or pre-cooked and require heating prior to service (e.g., theater snack bar, convenience store). These facilities receive 1 inspection annually.

"Moderate risk" restaurants and markets prepare foods for same day service and use disposable customer utensils, such as a fast food restaurant. These facilities receive 2 inspections annually.

"Higher risk" restaurants prepare, cool and reheat higher risk foods such as meat, poultry, and seafood; prepare foods such as soups and sauces for service over multiple days; or serve raw meat, poultry, and seafood such as sushi or oysters. These facilities receive 3 inspections annually.

11. Why is my bill lower than what it was last year? Is this a mistake?

No, a comprehensive study was conducted to determine the actual costs to perform each service. As a result, some fees were lowered, while others were increased.