

NOTICE OF INTENT TO OPERATE A FOOD PREMISES

In accordance with the Ontario Regulation 493/17 Food Premises – Section 5, all food premises are required to notify the Medical Officer of Health at the Eastern Ontario Health Unit (EOHU) of their operation. This information can be submitted online at www.EOHU.ca, or by filling out the application below and submitting it to the EOHU:

By email: info@eohu.ca

By fax: 613-933-7930

By mail: Eastern Ontario Health Unit, 1000 Pitt Street, Cornwall, Ontario K6J 5T1

Proposed date of opening: _____

Business or food premises name: _____

Business phone number: _____

Business address: _____

Email: _____

Website: _____

Owner name: _____

Home phone number: _____

Cell phone number: _____

Email: _____

Owner address: _____

Operator name: _____

Home phone number: _____

Cell phone number: _____

Email: _____

Operator address: _____

Corporation name / number: _____

Phone numbers: _____

Corporation address: _____



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If you require this information in an alternate format, please call 1 800 267-7120 and press 0.

Name of Principal Officer: _____

Type of food premises: _____

Number of certified food handlers: _____

Handwashing sinks – Locations: _____

Cooking equipment: _____

Dishwashing: Manual Number of sinks: _____

Mechanical Type: _____

Washrooms: Staff: Yes No

Public: Yes No

Garbage: Bulk bin Curbside

Other: _____

Water supply: Municipal Non-municipal: _____

Sewage disposal: Municipal Private

Tobacco sales: Yes No

Patio: Yes No