

FIRST SCHEDULE, *contd.*

FORM 7

THE PUBLIC HEALTH ACT
CERTIFICATE OF EXAMINATION

I _____ Medical Officer
(Health) for the parish of _____
certify that I have examined _____
employed in the food-handling establishment known as _____
_____ at _____
and have found him/her to be free from any communicable disease.

Dated the _____ day of _____, 19 _____

Medical Officer (Health)
for the parish of _____

SECOND SCHEDULE (Regulations 3(2), 4(6), 26(3), (8)
and (10))

PART I

*Fees for Application for Licences and Renewal of Licences in
Food-handling Establishments*

	\$
1. Full service restaurants, including <i>a-la-carte</i> restaurants	5,000.00
2. Quick service restaurants (including franchise operators, pizzerias, delicatessens and all other types of cafes) ...	7,000.00
3. Food service operations within institutions, including hospitals, schools, colleges, universities	2,500.00
4. Food processing and manufacturing plants, including beverage, bottling, canning and ice making plants ...	10,000.00
5. Meat, poultry and fish processing plants	10,000.00
6. Milk, ice cream and frozen novelty plants	10,000.00
7. Food commissaries and dry foods stands	1,500.00
8. In-flight food catering services and other food catering establishments	5,000.00
9. Meat, poultry, fish shops	3,000.00
10. Supermarkets, bakeries and pastry shops	4,000.00
11. Food warehouses, cold storage facilities and wholesale food stores	7,500.00