

**Plan Review Application**

Please answer the following questions and return this form to our office. If you have any questions, please call

765-762-3035. This questionnaire is not a complete list of requirements but should be used as a guideline. The sanitation requirements noted in this document are specified under the Retail Food Establishment Sanitation Requirements Title 410 IAC 7-24. Please use this rule as it pertains to section numbers referenced at the end of each question.

**Owner/Corporation Information:**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Establishment Information:**

 \_\_\_\_ New Construction \_\_\_\_ Existing/Remodel Project # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Establishment Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Establishment Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Person’s Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Projected Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Projected Completion Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Engineer/Architect Information:**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Recommended plan sizes should not exceed 11” x 14”. Include layout of the floor plan.***

I have submitted plans/applications to the authorities listed below on the following dates:

Zoning \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Plumbing \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Septic \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Planning \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Electric \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fire \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Building \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of floors on which operations will be conducted \_\_\_\_\_\_\_

Number of seats \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Total square feet of facility \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approximate maximum number of meals to be served

Breakfast \_\_\_\_\_\_ Lunch \_\_\_\_\_\_ Dinner \_\_\_\_\_\_

Days and Hours of Operation:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sun \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mon \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tues \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Wed

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Thurs \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fri \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sat

Type of service (check all that apply)

Sit down meals \_\_\_\_\_\_ Take out \_\_\_\_\_\_ Caterer \_\_\_\_\_\_ Mobile Vendor \_\_\_\_\_\_

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list job title of the certified food handler (title 410 IAC 7-22) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How will employees be trained in food safety (section 119) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Food**

Special consideration needs to be given to the Standard Sanitary Operating Procedures (SSOP). The following

procedures and questions should be considered before any planning/construction begins. This section should be

completed by the operator.

Please provide a list of all planned food vendors (section 142)?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What is the procedure for receiving food shipments (section 166)? Are temperatures checked and containers

inspected for damage? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What is the anticipated frequency of food deliveries for:

Frozen \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fresh \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dry \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your facility required to have pasteurized products (section 153)? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you intend to make low-acid or acidified foods and intend your products to be shelf stable?

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

If yes, have you passed the Better Process and Control School exam (section 143)?

Please provide a copy of the certification.

Do you intend to make reduced oxygen packaged (ROP) (def. 73) foods (section 195)? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list the ROP foods \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Food Preparation**

Please list the foods that will be prepared a day or more in advanced \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What will be your procedure to prevent employees from touching foods that are ready-to-eat and will not be cooked or heat treated (e.g. sushi, lettuce, buns, etc.) (section 171)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe your date marking system (section 191) for potentially hazardous (section 66) ready-to-eat foods (sections 72, 191) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will all produce be washed prior to use (section 175)? Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

If no, why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe the procedure to minimize the amount of time potentially hazardous foods will be kept in the temperature danger zone (41° F – 135° F) during preparation (section 189) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Provide a list of food that will need to be thawed before cooking next to the process it will be used to thaw (e.g. frozen meat) (section 199)

|  |  |
| --- | --- |
| Process | Type of Food |
| Refrigeration |  |
| Running water less than 70° F |  |
| Microwave as part of the cooking process |  |
| Cook from frozen |  |
| Other (describe) |  |

Provide a list of food that will need to be cooled next to the process in which it will be used to cool (e.g. leftovers) (section 189, 190)

|  |  |
| --- | --- |
| Process | Type of Food |
| Shallow pans under refrigeration |  |
| Ice and water bath |  |
| Reduced volume (e.g. quartering a large roast) |  |
| Ice paddles |  |
| Rapid chill devices (e.g. blast freezer) |  |
| Other (describe) |  |

What procedures will be in place to ensure that foods are reheated to 165 F or above (section 188)? \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Will a buffet be served? Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

If yes, who will be responsible for ensuring that the buffet is protected from consumer contamination

(section 181)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Hot and Cold Holding**

Will Time as a Public Health Control (section 193) be used for potentially hazardous food(s) either hot or cold?

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_ Note: These procedures must be submitted and approved before use

Will raw animal food be offered to the public in an undercooked form (e.g., sushi, rare hamburgers, eggs over

easy)? Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

If yes, please attach your consumer advisory statement (section 196)

Who will be assigned the responsibility of taking food temperatures and how will temperatures be taken

(Section 119)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Describe how cross-contamination of raw meat and ready-to-eat food will be prevented in a refrigeration unit(s)

(i.e., walk-in coolers, under the counter coolers, etc.) (section 173) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Describe the storage of different types of raw meat and seafood in the same unit and how cross-contamination will

be prevented. (Section 173) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Sanitization**

Who will be assigned the responsibility of ensuring the correct amount of sanitizer being used (section 119)? \_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What type of chemical sanitizer(s) will be the facility use (section 294)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Will the facility have test kits/papers on site for all types of chemical sanitizers (section 291)?

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

How will cooking equipment, cutting boards, counter tops and other food contact surfaces, which cannot be

submerged in a sink or put through a dishwasher, be sanitized (section 303)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Poisonous or Toxic Materials and Personal Care Items**

Where will poisonous or toxic materials be stored? Including any for retail sale (section 439)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Will the facility us a hand sanitizer (section 131)? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, what brand? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will the facility ensure that insecticides and rodenticides are Approved for Use in Food Establishments and that

they are applied in a safe manner (section 119)? Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

If no, why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will all spray bottles be clearly labeled (section 438)? Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

If no, why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where will first aid supplies be stored (section 421)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Miscellaneous**

Will any part of the retail food establishment open directly into any part of any living or sleeping quarters

(section 423)? Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

Has the facility registered or applied for a permit from the regulatory authority (section 107)?

Yes \_\_\_\_\_ No \_\_\_\_\_

**Ware washing/Dishwashing**

What are the dishwashing methods (section 269)? 3-compartment Sink \_\_\_\_\_\_ Dish Machine \_\_\_\_\_\_ Both \_\_\_\_\_\_

If a 3-compartment sink is used, which sanitizing method will be used? Hot Water \_\_\_\_\_\_ Chemical \_\_\_\_\_\_

If a dish machine is used, which sanitizing method will be used? Hot Water \_\_\_\_\_\_ Chemical \_\_\_\_\_\_

If using hot water, how will you ensure that the unit is sanitizing the utensils (sections 258, 303) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If using hot water, will a booster heater be used? Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

If no, why not? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your chemical dish machine have an alarm that indicates when more chemical sanitizer needs to be added (section 281)? Yes \_\_\_\_\_ No \_\_\_\_\_

What type of alarm will be used to detect when the sanitizer is too low? )? Sound \_\_\_\_\_ Visual \_\_\_\_\_

Can the largest piece of equipment be submerged into the 3-comparment sink or dish machine (section 233)?

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

Does the facility plan to use alternative manual ware washing equipment (section 233)?

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

If yes, please submit your procedure in a separate document for review.

Does your facility have enough drain boards/utensil racks/carts for the air drying of equipment and utensils for either the 3-compartment sink or the dish machine (section 289)? Please describe \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Water Supply**

Is the water supply: Public \_\_\_\_\_ Private \_\_\_\_\_

If public, skip next question

**Waste Water/Sewage Disposal**

Is the sewage disposal system: Public \_\_\_\_\_ Private \_\_\_\_\_

If public, skip next question

Has the waste treatment system been approved by the state or local septic inspector (section 376)?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please submit your procedure on a separate document for review.

**Plumbing**

Are hot and cold-water fixtures provided at every sink (section 33)? Yes \_\_\_\_\_ No \_\_\_\_\_

If a water supply hose is to be used for potable water, is it made from food-grade materials (section 364)?

Yes \_\_\_\_\_ No \_\_\_\_\_

What is the recovery time, volume, and capacity of the hot water heater (section 329)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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The following technical information is needed on the proposed plumbing. This section is best completed by a

licensed plumber or engineer (section 336).

|  |  |  |
| --- | --- | --- |
| Fixture | Water Supply | Sewage Disposal |
|  | AVB | PVB | VDC | HB | Air Gap | Air Break | Air Gap | Direct Contact |
| Dishwasher |  |  |  |  |  |  |  |  |
| Ice Machine(s) |  |  |  |  |  |  |  |  |
| Mop/Service Sink |  |  |  |  |  |  |  |  |
| 3-Compartment Sink |  |  |  |  |  |  |  |  |
| 2-Compartment Sink |  |  |  |  |  |  |  |  |
| 1-Compartment Sink |  |  |  |  |  |  |  |  |
| Hand Sink(s) |  |  |  |  |  |  |  |  |
| Dipper Well |  |  |  |  |  |  |  |  |
| Hose Connections |  |  |  |  |  |  |  |  |
| Asian Wok/Stove |  |  |  |  |  |  |  |  |
| Toilet(s) |  |  |  |  |  |  |  |  |
| Kettle(s) |  |  |  |  |  |  |  |  |
| Thermalizer |  |  |  |  |  |  |  |  |
| Overhead Spray Hose |  |  |  |  |  |  |  |  |
| Other Spray Hose(s) |  |  |  |  |  |  |  |  |
| Other: |  |  |  |  |  |  |  |  |
| Other: |  |  |  |  |  |  |  |  |
| AVB=Atmospheric Vacuum Breaker | HB=Hose Bib Vacuum Breaker |
| PVB=Pressure Vacuum Breaker | VDC=Vented Double Check Valve |

Has contact been made to the municipality to determine if a grease trap is required? Yes \_\_\_\_\_ No \_\_\_\_\_

What would be the frequency of cleaning for the grease trap (section 378)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Handwashing/Toilet Facilities**

Handwashing sinks are required in each food preparation and dishwashing area (section 344).

How many hand sinks will be provided? \_\_\_\_\_\_\_\_

Are all toilet room doors self-closing where applicable (section 352)? Yes \_\_\_\_\_ No \_\_\_\_\_

Are all toilet rooms equipped with adequate ventilation (section 309)? Yes \_\_\_\_\_ No \_\_\_\_\_

Room Finish Schedule – What the Interior of the Facility will look like Please indicate which materials (i.e. quarry tile, stainless steel = SS, plastic cove molding, etc.) will be used in the following areas (section 402).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Area** | **Floor** | **Coving** | **Wall** | **Ceiling** |
| Bar |  |  |  |  |
| Consumer Self Service |  |  |  |  |
| Dishwashing |  |  |  |  |
| Food Storage |  |  |  |  |
| Garbage Storage |  |  |  |  |
| Kitchen |  |  |  |  |
| Mop/Service Sink Area |  |  |  |  |
| Serving Line |  |  |  |  |
| Toilet Rooms |  |  |  |  |
| Other |  |  |  |  |
| Other |  |  |  |  |

**Personal Belongings**

Are separate dressing rooms/lockers provided for the employees (section 417)?

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

Describe the storage location for employee’s personal belongings (sections 418, 422) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Where is the designated area for employees to eat, drink, and use tobacco (section 136)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Equipment**

Will all of the equipment meet the design and construction for the American National Standards Institute (ANSI)

standards or meet section 205 criteria? Yes \_\_\_\_\_ No \_\_\_\_\_

Will the utensils and food storage containers be made from food-grade quality materials (section 205)?

Yes \_\_\_\_\_ No \_\_\_\_\_

Will any pieces of used equipment be utilized (section 106)? Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

If so, please list equipment type \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Is the ventilation hood system sufficient for the needs of the facility (section 307)?

Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

Will all of the equipment used for the storage of potentially hazardous foods be able to meet the minimum

temperature requirements (frozen food 0 F, cold food 41 F, hot food 135 F)? Yes \_\_\_\_\_ No \_\_\_\_\_ NA \_\_\_\_\_

Please list equipment types for the hot and cold holding of foods; also during serving or transporting (section 187)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Will each refrigeration unit have a thermometer (section 256)? Yes \_\_\_\_\_ No \_\_\_\_\_

What types of counter protective guards for food (sneeze guards) will be used for consumer self-service

(Section 179)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Insect and Rodent Harborage**

Will all outside doors be self-closing, when applicable, and rodent/insect proof (section 413)?

Yes \_\_\_\_\_ No \_\_\_\_\_

Will screens be provided on any open windows/doors to the outside (section 413)? Yes \_\_\_\_\_ No \_\_\_\_\_

Will air curtains be installed (made from either plastic or mechanical)? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, where on out outer openings (section 413)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will all pipes and electrical conduit chases be sealed (i.e. ventilation systems, exhaust, and intake be

protected) (section 414)? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the area around the building clear of unnecessary debris, brush, and other harborage conditions (section 426)?

Yes \_\_\_\_\_ No \_\_\_\_\_

Do you plan to use a pest control service? Yes \_\_\_\_\_ No \_\_\_\_\_

Frequency \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reuse and Recyclables**

Describe the surface for refuse/recyclables that the outside dumpster will be located on (section 382)? \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where will recyclables be stored prior to pick-up? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Lighting**

What are the foot candles of light for the following areas (section 411)?

Food Prep Areas \_\_\_\_\_\_\_\_\_\_\_\_\_ Dishwashing areas \_\_\_\_\_\_\_\_\_\_\_\_\_

Dry Storage Areas \_\_\_\_\_\_\_\_\_\_\_\_\_ Restrooms and walk-in refrigeration units \_\_\_\_\_\_\_\_\_\_\_\_\_

*Please check items submitted for review. Other information may be required by the regulatory authority for the proper review of the proposed construction, conversion, or modification, and procedures for operating a retail food establishment. Contents and Specifications for Facility and Operating Plans as required in Section 110 or 410 IAC 7-24.*

\_\_\_ Proposed menu (including seasonal, off-site, and banquet menus

\_\_\_ Anticipated volume of food to be stored, prepared, sold, or served

\_\_\_ Proposed layout, mechanical schematics, construction materials, and finish schedules

\_\_\_ Proposed equipment types, manufacturers, model numbers, locations, dimensions, performance capacities

 and installation specifications

\_\_\_ Evidence that standard procedures that ensure compliance with ISDH Rule 410 IAC 7-24 are developed or are

 being developed

\_\_\_ Plan review questionnaire completed and submitted to the regulatory authority

Additional Information:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_