FOOD ESTABLISHMENT PLAN REVIEW GUIDE

The Process

1. A Sanitarian will meet with you to go through this information.
2. The Food Establishment Planning Guide will be given to you at the meeting.
3. This guide should be completed and returned to this office with all requested items. The plans will be reviewed by a Sanitarian, within 30 days.
4. A contact will be made regarding the status of your submission. At this time, more information could be requested, the plan could be approved, or the plan could be disapproved. The letter will specify the action required by you.
5. Revisions and alterations can be made and re-submitted by you. This can be done at any time during the process, but delays may occur due to the new information.
6. Once the plan has been approved, an approval letter and an application for the license will be mailed to you. At this time, the plan review and license fees will need to be paid.
7. Return the application, mailed with your approval letter, and fees to this office.
8. Call at least 7 days ahead for a pre-opening inspection. During the inspection, the license will be delivered if all requirements are satisfactorily met. Failure to meet all requirements at the pre-opening inspection will delay the opening of your establishment.
Fee $____________

Name of Facility__________________________________________________________
Address_________________________________________________________________

Name of Applicant/Contact Person _________________________________________
Address __________________________________________________________________
Telephone________________________

Architect/Engineer__________________________________________________________
Address___________________________________________________________________

Projected Date for Start of Construction__________________________
Projected opening date ______________

Type of Facility (check those applicable) If retail food and food service are
_______ Retail Food Establishment checked, please indicate which will most
_______ Food Service Operation likely represent the largest portion off
your sales.

Nature of Application (Check One) _________________________________________
_______ New Facility
_______ Remodeling or Conversion

Water Supply (Check One) Sewage Disposal System (Check One)
_______ Public Supply _______ Municipal Sewer
_______ P.W.S. Number _______ OEPA Septic Permit

Hours of Operation: Sunday _____________ Thursday ________________
Monday _______________ Friday ______________
Tuesday _______________ Saturday ___________
Wednesday ____________

Number of Seats: _______________ Projected Number of Staff________

Total Square Feet of Facility: __________________________

Proposed Number of Incoming Food Deliveries per Week _________________

Type of Services Provided: Sit Down Meals __________
(Check all that Apply) Drive Thru __________
_______ Take Out __________
_______ Catering __________
_______ Retail Food __________
_______ Deli __________
_______ Grocery __________
_______ Buffet __________
_______ Seasonal (6 mos. or less) __________
PLEASE REMEMBER TO ENCLOSE THE FOLLOWING DOCUMENTS

1) Full Proposed Menu (Including seasonal, off-site and banquet menus)
2) Lighting plan for all areas of the operation, including the walk-in coolers.
3) Equipment Installation List (Attached). Equipment is to include all sinks, shelving, racks, work surfaces, as well as the standard equipment (coolers, cooking appliances, etc).
4) Interior Finishes Chart (Attached)
5) Site plan, showing location of business in building, location of building on site including alleys, streets, and location of any outside facilities (dumpsters, walk-in coolers).
6) Plan, drawn to scale, of facility showing location of equipment, plumbing fixtures, and ventilation hoods
   a) CONTENTS AND FORMAT OF PLANS: The plans shall be a minimum of 11 x 14 inches in size and the layout of the floor plan accurately drawn to a minimum scale of 1/4 inch=1 foot. Larger operations may wish to use separate pages for the kitchen, dining and storage areas as needed.
b) The plan shall show the location and when requested drawings of all food service equipment. Each piece of equipment shall be clearly labeled on the plan with its common name or a notation referring to the Equipment Installation List.
c) For operations that use fresh fruits or vegetables, a separate “food prep sink” shall be installed and used only for washing and preparing fruits and vegetables.
d) Handwashing sinks shall be installed in areas where food is prepared, dishes are washed, and in all restrooms.
   1. The plan layout shall also contain:
   2. Room sizes
   3. Aisle space
   4. The placement of the equipment on the floor plan
   5. Cabinet location for storing sanitizers and chemicals
   6. Location of mop sink

e) Auxiliary areas such as storage rooms, garbage rooms, toilets, basements and/or cellars are included in the review and shall be represented on the plan.
f) Be as specific and complete as possible. Questions about what information to provide are welcomed. Please call, but realize that all information must be submitted on paper to be part of the approval.

All required construction permits such as building, plumbing, electrical, ventilation, fire etc. should be obtained and final inspections approved before the health department may issue a Food Service or Retail Food License. The permitting agencies may include the State of Ohio, your local government or a combination of the two. Provide a file copy of final approval sign off sheets by each aforementioned inspector. Check with local Fire Departments for more information on fire suppression/hood systems.
<table>
<thead>
<tr>
<th>Equipment</th>
<th>Make and Model</th>
<th>ID# or Code on plans</th>
<th>New (N) or Used (U)</th>
<th>Plumbing Required (Y/N)</th>
<th>Masonry Island</th>
<th>Approved Legs</th>
<th>Casters</th>
<th>Attached</th>
<th>Attached</th>
<th>Separation (inches)</th>
<th>Attached</th>
<th>Separation (inches)</th>
<th>Portable</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Room Name</td>
<td>Floors</td>
<td>Walls</td>
<td>Ceilings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------</td>
<td>--------</td>
<td>-------</td>
<td>----------</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Material</td>
<td>Finish</td>
<td>Baseboard</td>
<td>North</td>
<td>South</td>
<td>East</td>
<td>West</td>
<td>Material</td>
<td>Finish</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ex. Kitchen</td>
<td>VCT</td>
<td>smooth, sealed</td>
<td>4” roll vinyl</td>
<td>FRP</td>
<td>Stainless Steel</td>
<td>FRP</td>
<td>Painted Gypsum</td>
<td>Vinyl-faced gypsum tile</td>
<td>smooth</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Flow Chart Example

1. Hot plates and griddle
2. Round plates (hot spread)
3. Pot and pan storage (under)
4. Pressure steamer (counter)
5. All-purpose oven
6. Spreader bite
7. Hot food containers.

Trash

Food

Dishes

Dining Area

Serving counter

Dish storage unit

Dishwasher

Dish cart

Dishwashing

Closet

Storeroom

Shelving

Food

Coffee urns on stand

Work counter
Refrig., fl. cab’s.

Lav., sink

Sink

Dishwash

Pass.

Cold dish table

Hot food table

Refrig., Fl. cab’s.

Stand

Mixer

Dishwasher table

Slicer

Donut’s table

Pots, pans rack

Auxiliary Dining Area

Donut’s table

Dish rack

Dish cart

Dishwasher