



**Type of Service**

**(Check all that applies)**

Sit Down Meals

\_\_\_\_\_

Take Out

\_\_\_\_\_

Caterer

\_\_\_\_\_

Mobile Food Unit

\_\_\_\_\_

Push Cart

\_\_\_\_\_

Limited Food Service

\_\_\_\_\_

Temporary Food Stand

\_\_\_\_\_

Single Service Utensil Only

\_\_\_\_\_

Multi-Use Utensil Service Only

\_\_\_\_\_

Both Multi-Use and Single Service Utensils

\_\_\_\_\_

Other \_\_\_\_\_

**Please Enclose the Following Documents**

- Proposed menu items (including seasonal variations in the menu).
- Manufacturer specification sheets for each piece of equipment shown on plans.
- Site plan showing location of business in building, location of building on site including alleys, streets and location of any outside facility (dumpster, walk-ins, etc.).
- Plan of facility drawn to scale showing location of equipment, plumbing, electrical service and mechanical ventilation, including location of all electrical panels.

## Contents And Format Of Plans And Specifications

1. The plans should 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 inches = 1 foot. This is to allow for ease in reading.
2. Information accompanying the plans should include; the proposed menu, seating capacity, projected daily meal volume for food service operation.
3. The plans should show the location and when requested elevated drawing of all food service equipment. Each piece of equipment shall be clearly labeled on the plan with its common name.
4. Adequate rapid cooling including ice baths and refrigeration, and hot-holding facilities for potentially hazardous food (PHF) should be clearly designated on the plan.
5. When menu dictates, separate food preparation sinks should be labeled and located to preclude contamination and cross-contamination of raw and ready to eat foods.
6. Adequate hand washing facilities used for no other purpose should be designated for each toilet facility and in the immediate area of food preparation and dishwashing area.
7. The plan layout should contain room size, aisle space, space between and behind equipment, and the placement of the equipment on the floor.
8. Auxiliary areas such as storage rooms, garbage rooms, toilets, basements and/or cellars used for storage or food preparation should be represented on the plan and all features of these rooms shown as required by the standards.
9. **The plans and specifications should also include:**
  - A. Entrances, exits, loading/unloading areas and docks;
  - B. Completed finish schedules for each room to include floors, walls, ceilings and coved juncture bases; approved materials for food preparation, handling and storage areas include quarry tile, ceramic tile, sealed concrete, commercial linoleum, fiberglass reinforced panels, stainless steel, wall board painted with washable, nonabsorbent paint, vinyl coated ceiling tiles, and brick, cinder blocks, slag blocks, or concrete blocks, if glazed, tiled, plastered or filled so as to provide a smooth surface. *If specifying the use of a material not on this list, include a sample of the material for evaluation.*
  - C. Plumbing schedule to include location of the floor drains, floor sinks and water supply lines, overhead waste water lines, hot water lines, hot water generating equipment with capacity and recovery rate, backflow prevention, waste water line connections.
  - D. Electrical layout, electrical panels and disconnects.
10. **Lighting Requirements;**
  - A. Food contact surfaces = 50 foot candles (540 lux)
  - B. Utensil washing area = 50 foot candles (540 lux) (lighting in utensil washing area and on food contact surfaces shall be measured at 30 inches above the floor and/or at the work levels)
  - C. All other area = 10 foot candles (110 lux) (Lighting to be measured at 30 inches above the floor.)
  - D. Light bulbs in food preparation, storage, and display areas shall be shatter-proof or shielded so as to preclude the possibility of broken bulbs or lamps falling into food. Shatter-proof or shielded bulbs need not be used in food storage areas where the integrity of the unopened

packages will not be affected by broken glass falling onto them and the packages, prior to being opened, are capable of being cleaned. Heat lamps shall be protected against breakage by a shield surrounding and extending beyond the bulb, leaving only the face of the bulb exposed in food preparation area.

11. Insure that all food service/kitchen equipment is NSF International (NSF) listed, Underwriters Laboratories Inc., Classified for Sanitation or if not NSF or UL listed/classified, be constructed to meet NSF standards as specified according to 15A NCAC 18A .2600, Rule .2617 paragraph (d).
12. Source of water supply and method of sewage disposal. The location of these facilities should be shown and evidence submitted that state and local regulations are to be complied with.
13. As specified according to 15A NCAC 18A .2600, Rule .2632 "Storage Spaces". All items stored in rooms where food or single-service items are stored shall be at least 12 in. (30.48 cm.) above the floor when placed on stationary storage units or 6 in. (15.24 cm.) above the floor when placed on portable storage units or otherwise arranged so as to permit thorough cleaning.
14. Ventilation schedule for each room.
15. A mop sink with facilities for hanging wet mops and storage of mop buckets. As specified according to 15A NCAC 18A .2600, Rule .2626, "Disposal Of Waste". Facilities shall be provided for the washing and storage of all garbage cans and mops. These facilities can be incorporated into a janitor closet.
16. Garbage can washing area/facility. As specified according to 15A NCAC 18A .2600, Rule .2626, "Disposal Of Waste". Adequate facilities shall be provided for the washing and storage of all garbage cans. The cleaning facilities shall include a combination faucet, hot and cold water, a threaded nozzle and a curbed impervious pad, a minimum recommended size of 36" x 36" x 4" with walls finished being easily cleanable and nonabsorbent to a height of 48 inches. A shelf may also be provided for the storage of cleaning supplies and/or chemicals. ***If the unit is utilized as a combination can wash/mop sink than the minimum recommended size for this unit is 36" by 48"***.
17. Dumpster pad and location as specified according to 15A NCAC 18A .2600, Rule .2626, "Disposal Of Waste".
18. Grease traps and/or grease interceptor location.
19. Grease storage containers and storage location.
20. Cabinets/shelves for storing toxic chemicals.
21. Dressing rooms, locker area, employee rest area, and/or coat rack as required.
22. Completed checklist.
23. Site plan (plot plan)

## FOOD PREPARATION REVIEW

Check categories of Potentially Hazardous Food (PHF) to be handled prepared and served.

CATEGORY	Yes	No
Thin meats, poultry, fish, eggs (hamburgers, chicken breast, fish filet, etc.)	_____	_____
Thick meats, whole poultry (whole roasts, pork, chicken, meat loaf, etc.)	_____	_____
Hot processed foods (soups, stews, chowders, casseroles)	_____	_____
Bakery goods (pies, custards, creams)	_____	_____
Other: _____	_____	_____

### PLEASE CHECK BOX FOR THE FOLLOWING QUESTIONS

#### FOOD SUPPLIES

1. Are all food supplies from inspected and approved sources? Yes\_\_\_\_\_ No\_\_\_\_\_

#### COLD STORAGE

2. Are adequate and approved freezer and refrigeration available to store frozen foods at 0<sup>0</sup> F and below, and refrigerated foods at 45<sup>0</sup> F (7<sup>0</sup> C) and below? Yes\_\_\_\_\_ No\_\_\_\_\_

Provide the method used to calculate cold storage requirements: \_\_\_\_\_  
\_\_\_\_\_

Provide total footage of space dedicated to walk-in cold storage \_\_\_\_\_  
Provide total footage of space dedicated to reach-in cold storage \_\_\_\_\_

3. Will raw meats, poultry and seafood be stored in the same refrigerators and freezer with cooked/ready-to-eat foods? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, how will cross-contamination be prevented? \_\_\_\_\_  
\_\_\_\_\_

4. Does each refrigerator/freezer have a thermometer? Yes\_\_\_\_\_ No\_\_\_\_\_  
Number of refrigeration units:\_\_\_\_\_ Number of freezer units:\_\_\_\_\_

#### THAWING

Please indicate by checking the appropriate box how PHF (potentially hazardous food) in each category will be thawed. More than one method may apply.

Thawing Process	Thick Meats	Thin Meats	Fish Seafood	Poultry Products	Baked Goods
Refrigeration					
Running Water less than 70 <sup>0</sup> F (21 <sup>0</sup> C)					
Cooked Frozen (indicate wt. lbs.)					
Microwave					

Other (describe): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COOKING PROCESS**

**Item #1** - Will food product thermometers (0<sup>0</sup> – 212<sup>0</sup> F) be used to measure final cooking/reheating temperatures of PHF (potentially hazardous food)? Yes\_\_\_\_\_ No\_\_\_\_\_

**Minimum cooking time and temperature of product utilizing convection and conduction heating equipment:**

Product	Time & Temperature	Product	Time & Temperature
Beef roast	130 <sup>0</sup> F (121 min)	Comminuted meats	155 <sup>0</sup> F (15 sec)
Seafood	145 <sup>0</sup> F (15 sec)	Poultry	165 <sup>0</sup> F (15 sec)
Port	155 <sup>0</sup> F (15 sec)	Other PHF	145 <sup>0</sup> F (15 sec)
Eggs	145 <sup>0</sup> F (15 sec)	* reheating PHF	165 <sup>0</sup> F (15 sec)

**Item #2 - Hot Holding**

How will hot PHF (potentially hazardous food) be maintained at 140<sup>0</sup> F (60<sup>0</sup> C) or above during holding for service? Indicate type and number of hot holding units.

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**Item #3 - Cold Holding**

How will cold PHF (potentially hazardous food) be maintained at 45<sup>0</sup> F (7<sup>0</sup> C) or above during holding for service? Indicate type and number of hot holding units.

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**Item #4 - Cooling**

Please indicate by checking the appropriate box how PHF (potentially hazardous food) will be cooled to 45<sup>0</sup> F (7<sup>0</sup> C) within 6 hours (140<sup>0</sup> F to 70<sup>0</sup> F in 2 hours and 70<sup>0</sup> F to 45<sup>0</sup> F in 4 hours).

Cooling Process	Thick Meats	Thin Meats	Fish Seafood	Poultry Products	Baked Goods
Shallow Pans					
Ice Baths					
Rapid Chill					

Other (describe): \_\_\_\_\_

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**FOOD PREPARATION**

1. Please list categories of food prepared more than 12 hours in advance of service.  
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\_\_\_\_\_  
\_\_\_\_\_  
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2. Will disposable gloves and/or utensils and/or food grade paper be used to minimize handling of ready-to-eat foods? Yes\_\_\_\_\_ No\_\_\_\_\_
  
3. Is there an established policy to exclude or restrict food workers who are sick or have infected cuts and lesions? Yes\_\_\_\_\_ No\_\_\_\_\_ Please describe procedure: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
4. How will cooking equipment, cutting boards, counter tops and other food contact surfaces which cannot be submerged in sinks or put through a dishwasher be cleaned and sanitized? Please describe procedure: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
5. How will ingredients for cold ready-to-eat foods such as tuna, mayonnaise and eggs for salads and sandwiches be pre-chilled before mixed and/or assembled? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**THE FOLLOWING 4 QUESTIONS DEAL WITH FOOD PREPARATION PROCEDURES FOR FACILITIES.**

Food preparation procedures are needed to obtain information on how the food is prepared and to help determine that adequate facilities are available. *The food preparation procedures should include types of food prepared, time of day and equipment used for service in the facility.*

**(Attached is Food Item Preparation Worksheet Supplement for additional food items prepared in the facility.)**

If your company has food preparation procedures already developed, these can be submitted as part of the plan review approval process.

**1. Produce Preparation Procedures**

- a. Will produce be washed or rinsed prior to use? Yes\_\_\_\_\_ No\_\_\_\_\_
- b. Is there an approved location used for washing or rinsing produce? Yes\_\_\_\_\_ No\_\_\_\_\_
- c. Will it be used for other operations? Yes\_\_\_\_\_ No\_\_\_\_\_

Please indicate location of produce washing equipment and describe the procedures. Include time of day and frequency for washing or rinsing the produce at this location:

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Please describe the produce preparation procedures and indicate location of equipment to support this operation. The preparation procedure should include dishes (proposed menu items) in which the produce will be used, and should include time of day and frequency of preparation for the produce at this location:

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**2. Seafood Preparation Procedures**

- a. Will seafood be washed or rinsed prior to use? Yes\_\_\_\_\_ No\_\_\_\_\_
- b. Is there an approved location used for washing or rinsing seafood? Yes\_\_\_\_\_ No\_\_\_\_\_
- c. Will it be used for other operations? Yes\_\_\_\_\_ No\_\_\_\_\_

Please indicate location of seafood washing equipment and describe the procedures. Include time of day and frequency for washing or rinsing the seafood at this location:

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Please describe the seafood preparation procedures and indicate location of equipment to support this operation. The preparation procedure should include dishes (proposed menu items) in which the seafood will be used, and should include time of day and frequency of preparation for the seafood at this location:

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**3. Poultry Preparation Procedures**

- a. Will poultry be washed or rinsed prior to use? Yes\_\_\_\_\_ No\_\_\_\_\_
- b. Is there an approved location used for washing or rinsing poultry? Yes\_\_\_\_\_ No\_\_\_\_\_
- c. Will it be used for other operations? Yes\_\_\_\_\_ No\_\_\_\_\_

Please indicate location of poultry washing equipment and describe the procedures. Include time of day and frequency for washing or rinsing the seafood at this location:

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Please describe the poultry preparation procedures and indicate location of equipment to support this operation. The preparation procedure should include dishes (proposed menu items) in which the poultry will be used, and should include time of day and frequency of preparation for the poultry at this location:

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**4. Pork and/or Red Meat Preparation Procedures**

- a. Will pork and red meats be washed or rinsed prior to use? Yes\_\_\_\_\_ No\_\_\_\_\_
- b. Is there an approved location used for washing or rinsing pork and red meats? Yes\_\_\_\_\_ No\_\_\_\_\_
- c. Will it be used for other operations? Yes\_\_\_\_\_ No\_\_\_\_\_

Please indicate location of seafood washing equipment and describe the procedures. Include time of day and frequency for washing or rinsing the seafood at this location:

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Please describe the pork and red meats preparation procedures and indicate location of equipment to support this operation. The preparation procedure should include dishes (proposed menu items) in which the pork and red meats will be used, and should include time of day and frequency of preparation for the pork and red meats at this location:

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**I. DRY GOODS STORAGE**

1. Is appropriate dry good storage space provided for based upon menu, meals and frequency of deliveries? Yes\_\_\_\_\_ No\_\_\_\_\_

Provide information on the frequency of deliveries and the expected gross volume that is to be delivered each time.

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Provide total square footage of shelf space dedicated to dry storage \_\_\_\_\_ sq. ft.

Are approved food storage containers being used to store bulk food products? Yes\_\_\_\_\_ No\_\_\_\_\_

**II. FINISH SCHEDULE**

Applicants must fill materials (i.e., quarry tile, stainless steel, 6” plastic coved molding, etc.)

Area	Floor	Base	Walls	Ceiling
Kitchen				
Bar				
Food Storage				
Other Storage				
Toilet Rooms				
Dressing Rooms				
Garbage & Refuse Storage				
Mop Service Basin Area				
Other				

### III. PLUMBING

Plumbing Fixtures	Indirect Waste			Direct Waste
	(Floor sink)	(Hub Drain)	(Floor Drain)	
Dishwasher				
Garbage Grinder				
Ice Machines				
Ice Storage				
Food Prep Sinks				
Utensil/Pot Wash				
Handwash				
Steam Tables				
Dipper Wells				
Refrigeration				
Potato Peeler				
Other				
Other				
Other				
<p>If floor drains are not show on plans, please indicate location:</p> <hr/> <hr/> <hr/>				
Plumbing Fixture	Backflow Preventor		Vacuum Breaker	
Hose Connection				
Other				

**IV. DISHWASHING FACILITIES**

1. Size of pot/utensil sink to be used: \_\_\_\_\_ Two compartment sink  
 \_\_\_\_\_ Three compartment sink  
 \_\_\_\_\_ Four compartment sink  
  
 Size of sink vats: \_\_\_\_\_ Length \_\_\_\_\_ Width \_\_\_\_\_ Depth  
 Drainboards size: \_\_\_\_\_ Right \_\_\_\_\_ Left
2. Does the largest pot and pan fit into each compartment of the pot sink? Yes\_\_\_\_\_ No\_\_\_\_\_
3. What type of sanitizer is to be used?  
 \_\_\_\_Chlorine \_\_\_\_Iodine \_\_\_\_Other \_\_\_\_Quaternary Ammonium \_\_\_\_Hot Water \_\_\_\_Other
4. Is appropriate air drying space available for the air drying of all washed utensils with the use of drainboards, wall or overhead shelves, stationary or portable racks? Yes\_\_\_\_\_ No\_\_\_\_\_
 

Please describe type and location: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_
5. Is a Dishmachine used in the facility? Yes\_\_\_\_\_ No\_\_\_\_\_
6. Dishmachine Make and Model: \_\_\_\_\_
7. Type of sanitization used: \_\_\_\_\_ Chemical type: \_\_\_\_\_  
***Insure that a test kit is provided for the chemical used.***
8. Hot water (180<sup>0</sup> F temperature provided) Yes\_\_\_\_\_ No\_\_\_\_\_
 

Size of booster heater: \_\_\_\_\_
9. Is ventilation provided? Yes\_\_\_\_\_ No\_\_\_\_\_
10. All dishmachines shall have templates with operating instructions and all dishmachines shall have temperature/pressure gauges as requited that are accurately working.
11. Are test papers and/or kits available for checking sanitizer concentration? Yes\_\_\_\_\_ No\_\_\_\_\_
12. Is appropriate air drying space available for the air drying of all washed utensils with the use of drainboards, wall or overhead shelves, stationary or portable racks? Yes\_\_\_\_\_ No\_\_\_\_\_
 

Please describe type and location: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Provide total square footage of shelf space dedicated to air drying: \_\_\_\_\_ sq. ft.

**V. WATER SUPPLY**

1. Please check one: Is water supply Community? Yes\_\_\_ No\_\_\_ Municipal? Yes\_\_\_ No\_\_\_

**If the Water supply is other than a Municipal supply, it will be required to be registered with Public Water Supply.**

2. If water supply is from a Community Water Supply system is it registered and approved as public water supply? Yes\_\_\_\_\_ No\_\_\_\_\_

**If yes, please attach copy of written approval and/or permit.**

3. Is ice made on premises or purchased commercially? Yes\_\_\_\_\_ No\_\_\_\_\_

Please specify: \_\_\_\_\_

If made on premises than specification for the ice machine will need to be provided. Describe provision for ice scoop storage: \_\_\_\_\_

\_\_\_\_\_

**VI. INSPECT AND RODENT HARBORAGE**

1. Are all outside doors self-closing with rodent proof flashing? Yes\_\_\_ No\_\_\_ N/A\_\_\_

2. How is fly protection provided on all outside entrances?

A. Screen Doors Yes\_\_\_ No\_\_\_ N/A\_\_\_

B. Air Curtains (Fly Fan) Yes\_\_\_ No\_\_\_ N/A\_\_\_

3. All windows that open have one of the following forms for fly protection?

A. Minimum #16 mesh screening Yes\_\_\_ No\_\_\_ N/A\_\_\_

B. Air Curtains (Fly Fan) Yes\_\_\_ No\_\_\_ N/A\_\_\_

C. Self Closing Yes\_\_\_ No\_\_\_ N/A\_\_\_

4. All pipe penetrations, beverage chases & electrical conduit chases sealed; ventilation systems exhaust and intakes protected to prevent insects and other vermin from entering the facility.

**VII. GARBAGE AND REFUSE**

**Inside**

1. Do all containers have lids? Yes\_\_\_ No\_\_\_ N/A\_\_\_

2. Will refuse be stored inside? Yes\_\_\_ No\_\_\_ N/A\_\_\_

If so, where \_\_\_\_\_

3. A garbage can cleaning facility is required as specified by .15A NCAC 18A .2600, Rule .2600 Disposal of Wastes. Please specify area and size: \_\_\_\_\_  
\_\_\_\_\_

**Outside**

4. Is area around premises clear of unnecessary brush, litter, boxes and other vermin harborage? Yes\_\_\_\_\_ No\_\_\_\_\_ N/A\_\_\_\_\_

5. Will a dumpster be used? Yes\_\_\_\_\_ No\_\_\_\_\_ N/A\_\_\_\_\_  
Number \_\_\_\_\_ Size \_\_\_\_\_ Frequency of Pickup \_\_\_\_\_  
Contractor Service: \_\_\_\_\_  
\_\_\_\_\_

6. Will the dumpster be cleaned on site? Yes\_\_\_\_\_ No\_\_\_\_\_

**If the dumpster is to be cleaned on site, then the waste water from the cleaning operation will be required to be discharged to the sanitary sewer system.**

7. Is the dumpster to be cleaned by an off site contracted cleaning service? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, please provide name and address of the firm contracted for this service.

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: (\_\_\_\_)-(\_\_\_\_-\_\_\_\_) Fax: (\_\_\_\_)-(\_\_\_\_-\_\_\_\_)

8. Will a compactor be used? Yes\_\_\_\_\_ No\_\_\_\_\_ N/A\_\_\_\_\_  
Number \_\_\_\_\_ Size \_\_\_\_\_ Frequency of Pickup \_\_\_\_\_  
Contractor Service: \_\_\_\_\_  
\_\_\_\_\_

9. Will the compactor be cleaned on site? Yes\_\_\_\_\_ No\_\_\_\_\_ N/A\_\_\_\_\_

**If the compactor is to be cleaned on site, then the waste water from the cleaning operation will be required to be discharged to the sanitary sewer system.**

10. Is the compactor to be cleaned by an off site contracted cleaning service? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, please provide name and address of the firm contracted for this service.

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: (\_\_\_\_)-(\_\_\_\_-\_\_\_\_) Fax: (\_\_\_\_)-(\_\_\_\_-\_\_\_\_)

11. Describe surface and location where dumpster/compactor/cans are to be stored:  
\_\_\_\_\_

12. Will trash containers be stored outside? Yes\_\_\_\_\_ No\_\_\_\_\_  
If yes, please describe location: \_\_\_\_\_  
\_\_\_\_\_

13. Type and location of waste cooking grease storage receptacle: \_\_\_\_\_  
\_\_\_\_\_

14. Is there an area to store recycled containers? Yes\_\_\_\_\_ No\_\_\_\_\_  
Describe: \_\_\_\_\_  
\_\_\_\_\_

15. Location and size of grease trap: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VIII. MOP CLEANING FACILITIES**

1. Is a separate mop basin provided? Yes\_\_\_\_\_ No\_\_\_\_\_  
If yes, please describe facility for cleaning of mops and other equipment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IX. HANDWASHING/TOILET FACILITIES**

- 1. Is there an appropriate hand washing sink in each food preparation and warewashing area? Yes\_\_\_\_\_ No\_\_\_\_\_
- 2. Do all handwashing sinks including those in the restrooms have a mixing valve or combination faucet? Yes\_\_\_\_\_ No\_\_\_\_\_
- 3. Do self-closing metering faucets provide a flow of water for at least 15 seconds without the need to reactivate the faucet? Yes\_\_\_\_\_ No\_\_\_\_\_
- 4. Are soap dispensers (wall mounted, individual free standing pump dispensers) available at all handwashing sinks? Yes\_\_\_\_\_ No\_\_\_\_\_
- 5. Are hand drying facilities (paper towels, air blower, etc.) and waste receptacles available at all handwashing sinks and in each restroom? Yes\_\_\_\_\_ No\_\_\_\_\_
- 6. Are all toilet room doors self-closing? Yes\_\_\_\_\_ No\_\_\_\_\_
- 7. Is a handwashing sign posted in each employee restroom? Yes\_\_\_\_\_ No\_\_\_\_\_

**X. SEWAGE DISPOSAL**

- 1. Is building connected to a municipal sewer? Yes\_\_\_\_\_ No\_\_\_\_\_
- 2. If no, is private disposal system approved? Yes\_\_\_\_\_ No\_\_\_\_\_ Pending \_\_\_\_\_

**If yes, please attach a copy of the written approval and/or permit.**

**XI. DRESSING ROOMS**

- 1. Are separate dressing rooms provided? Yes\_\_\_\_\_ No\_\_\_\_\_
- 2. Describe storage facilities for employee’s personal belongings (i.e., purse, coats, boots, umbrellas, etc.): \_\_\_\_\_  
\_\_\_\_\_

**XII. GENERAL**

- 1. Are insecticides/rodenticides if used stored separately from cleaning and sanitizing agents? Indicate location: \_\_\_\_\_ Yes\_\_\_\_\_ No\_\_\_\_\_
- 2. Are all cleaning materials and toxicants stored away from food preparation/storage areas? This includes items used on premises, retail sales and personal medications. Yes\_\_\_\_\_ No\_\_\_\_\_ Please Describe Location: \_\_\_\_\_  
\_\_\_\_\_
- 3. Are all containers of toxic/cleaning material including sanitizing spray bottles clearly labeled? Yes\_\_\_\_\_ No\_\_\_\_\_
- 4. Are laundry facilities located on premises? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, what will be laundered? \_\_\_\_\_  
\_\_\_\_\_
- 5. Is a laundry dryer available? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, please describe location: \_\_\_\_\_  
\_\_\_\_\_
- 6. Location of clean linen storage: \_\_\_\_\_  
\_\_\_\_\_
- 7. Location of dirty linen storage: \_\_\_\_\_  
\_\_\_\_\_

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STATEMENT: I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior approval from this Health Regulatory Office may nullify this approval.

Signature(s) \_\_\_\_\_

\_\_\_\_\_  
Owner(s) or Responsible Representative(s)

Date: \_\_\_\_\_

# FOOD PREPARATION WORKSHEET SUPPLEMENT

Food Item: \_\_\_\_\_

Will the food item be washed or rinsed prior to use? If yes please indicate location of equipment and describe the washing procedures. Include time of day and frequency for washing or rinsing the product at this location:

Location of equipment: \_\_\_\_\_

Time of day and frequency: \_\_\_\_\_

Procedure used to wash or rinse food item: \_\_\_\_\_

Please describe the preparation procedures for the food items described above and indicate location of equipment to support this operation. The preparation procedure should include dishes in which the product will be used, and should include time of day and frequency of preparation for the food item at this location:

Location and type of equipment of equipment: \_\_\_\_\_

Time of day and frequency: \_\_\_\_\_

Food item preparation procedures: \_\_\_\_\_