

PLAN REVIEW INFORMATION REPORT
FOR FOOD SERVICE ESTABLISHMENTS
(NEW OR REMODELED)

NOTE: Floor plan showing location of all food service equipment including toilet rooms and fixtures provided therein, and a list of all food service equipment including manufacturer and model number MUST accompany this report.

Name of establishment _____

Address _____

Address _____ Telephone: _____

Architect/Engineering Firm _____

Address _____ Telephone: _____

Date construction is proposed to start _____ end _____

GENERAL

1. Seating capacity: _____
2. Number of employees on any given shift: _____

FLOORS

1. List type of floor material or covering:

Food preparation areas _____
Food storage areas _____
Utensil washing areas _____
Dressing/locker rooms _____
Toilet rooms and vestibules _____

2. Yes ___ NO ___ Floor drains provided in floors that are water flushed for cleaning or receive fluid wastes from equipment or in areas where pressure spray cleaning methods are used?
Yes_ NO _ Floors graded to drain?
Yes_ NO _ Floor/wall junctures sealed and coved?
3. Yes_ NO _ Floor/wall juncture seams not greater than 1/32 inch in all other areas?
4. Yes_ NO _ Exposed horizontal utility lines and pipes on the floor?

WALLS & CEILINGS

1. List type of materials:

Walls Ceilings

Food preparation areas _____
Equipment/utensil washing areas _____
walk-in refrigeration units _____
Toilet rooms and vestibules _____

2. Yes _____ NO _____ Are the above materials light colored, smooth, nonabsorbent, and easily cleanable?
3. Yes _____ NO _____ Studs, joists and rafters exposed in walk-in refrigeration units, food preparation areas, and equipment/utensil washing areas?
4. Yes _____ NO _____ Utility service lines and pipes unnecessarily exposed on walls or ceilings?
5. Yes_ _____ NO _ Exposed utility service lines and pipes installed in such a way that does not obstruct or prevent cleaning of walls and ceilings?
6. Yes_ _____ NO _ Exposed overhead sewer lines?

If answer to 3, 4, or 6 above is yes, explain on reverse side.

Note: Most acoustical ceiling materials are not approved for use in food preparation and utensil washing areas and toilet rooms. If acoustical ceiling materials are proposed for these areas, a sample must be submitted with plans.

WATER SUPPLY

1. Yes_ _____ NO _ Served by public system? Name _____
2. Yes_ _____ NO _ Served by individual water system approved by health department?
Date approved _____
3. Yes_ _____ NO _ Water pressure at least 20 psi in all areas?

SEWAGE & LIQUID WASTE DISPOSAL

1. Yes_ _____ NO _ Served by public sewerage system? Name _____
2. Yes_ _____ NO _ Served by individual sewerage system?
Yes_ _____ NO _ System approved by health department?
Date approved _____
3. Yes _____ NO _____ Utility sink or curbed cleaning facility with a floor drain provided for cleaning of mops and disposal of mop water?

PLUMBING

1. Yes_ _____ NO _ Backflow prevention devices (vacuum breakers) installed on all fixtures and equipment where an air gap at least twice the diameter of the water supply inlet is not provided between the inlet and the fixture's flood level rim? (Enclosed water filled equipment like disposals, coffee urns, potato peelers, dishwashing machines, etc.)
2. Yes_ _____ NO _ Direct connection between the sewer system and enclosed equipment having waste drainlines?
3. Yes_ _____ NO _ Safety "pop off" valve installed on water heaters, etc.?
4. Yes_ _____ NO _ N/A _ Floor drain provided for disposition of condensate water, etc., from walk-in refrigeration units?
5. YES_ _____ NO _ N/A Running water dipper well provided for ice cream dippers?
6. Yes_ _____ NO _ N/A _ All plastic potable water lines NSF approved or equivalent?
7. Yes _____ NO _____ All plumbing complies with applicable local ordinances or state and/or national plumbing code?
8. Yes _____ NO _____ Piping of nonpotable water system, such as air conditioning or fire protection, durably identified so that it is readily distinguishable from potable water piping?
9. Yes_ _____ NO _ Backflow prevention devices installed on all faucets to which a hose will be attached?

TOILET FACILITIES

- 1. Yes_ NO _ Are separate employee toilet rooms provided?
Number of flush toilets _____ Number of urinals _____ Number of lavatories _____
- 2. Yes_ NO _ Are public toilets provided for each sex?

	Male	Female
Number of flush toilets	_____	_____
Number of urinals	_____	N, 'A
Number of lavatories	_____	_____

- 3. Yes_ NO _ Do toilet rooms open to the outside of establishment?
- 4. Yes_____ NO _____ Toilet rooms completely enclosed and doors self closing?
- 5. Toilet room doors solid or louvered to makeup air? (Please circle type)
- 6. Yes_____ NO _____ N/A _____ Louvered doors covered with 16 mesh screen or equal?
- 7. Yes_ NO _ Toilet rooms vented to outside air by mechanical exhaust?

HANDWASHING FACILITIES

- 1. Yes NO Lavatory provided in or within 20 feet of each food preparation, utensil washing, and food dispensing or serving area?
- 2. Yes_____ NO _____ Lavatories provided with hot and cold water tempered by means of a mixing valve or combination faucet?
- 3. Yes_ NO _ Are any lavatory faucets self closing, slow closing, or metered?
Yes NO Designed to provide water flow for at least 15 seconds without reactivation?

GARBAGE & REFUSE STORAGE & DISPOSAL

- 1. Yes_ NO _ Storage room provided?
- 2. Yes_ NO _ Outdoor storage on metal rack or smooth, nonabsorbent surface such as concrete or machine-laid asphalt?
- 3. Yes_____ No _____ Solid waste container washing facilities including hot and cold water with vacuum breaker and drain to sewer provided?
Location? _____ Protected from freezing? Yes_ NO _
- 4. Yes_ NO _ Refuse to be incinerated on premises?
Yes_____ NO _____ Incinerator meets standards established by Air Pollution Control Commission and State Health Department (approved certificate on file with local health department)?

INSECT & RODENT CONTROL

- 1. Yes_ NO _ All outer openings protected against entry of insects and rodents by use of doors, screens, fans or equivalent?
- 2. Yes_ NO _ All outer doors self closing?
- 3. Yes_____ NO _____ Openings in floors, walls, ceilings for pipes, cables and conduits properly caulked or otherwise protected?

LIGHTING

- 1. Yes_ NO _ Minimum 20 footcandles artificial light provided on all food preparation surfaces and at utensil and equipment washing levels?
- 2. Yes_ NO _ Minimum 20 footcandles artificial light provided 30 inches above floor level in utensil and equipment storage areas and in lavatory and toilet areas?

3. Yes NO Minimum 10 footcandles artificial light provided 30 inches above floor level in walk-in refrigeration units, dry food storage areas, and all other areas (including dining areas during cleaning operations)?
4. Yes NO Artificial light fixtures shielded or shatterproof in food preparation, service, and display areas, and utensil and equipment washing and storage areas?

VENTILATION

1. Yes NO All combustion type heating devices, except those used for cooking purposes, properly vented to outside (water heaters, area heaters, furnaces, etc.)?
2. Yes NO Hoods provided on all cooking units having four or more burners?
3. Yes NO Stove hoods constructed of durable, easily cleanable materials?
4. Yes NO Hood exhaust rate not less than one hundred cfm over the face of the hood area, when three sides of hood are open; four sides open, minimum of one hundred fifty cfm?
5. Yes NO All exhaust ducts at least 6" in diameter or equivalent area?
6. Yes NO One exhaust duct provided for every six feet or fraction thereof of hood length?
7. Yes NO No point under hood area more than three feet vertical distance from duct vent unless exhaust fan rating compensates for any change made in distance?
8. Yes NO Exhaust system equipped with filters?
Yes NO Filters removable and installed 45 - 60° angle?
9. Yes NO Exhaust fans outer opening protected by self closing louvers or screens against entry of flying insects?
10. Yes NO Ventilation system complies with State Fire Marshal's and local fire prevention requirements or standards?
11. Yes NO Ventilation system exhaust and exhaust fans installed in such a manner so as not to create a nuisance or health problem at point of discharge?

DRESSING & LOCKER ROOMS

1. Yes NO Will employees routinely change clothes within the establishment?
2. Yes NO Lockers or other suitable facilities provided for storage of employee clothing and other belongings?

STORAGE FACILITIES

1. Yes No Facilities (racks, shelves) provided for the storage of food, single service articles, and clean utensils and equipment a minimum of six (6) inches above the floor?
2. Yes NO Separate cabinet storage facilities provided for storage of poisonous and toxic materials?

LAUNDRY

1. Yes NO Nonabsorbent containers or washable laundry bags provided for storage of soiled clothes and linens?
2. Yes NO Soiled linens, cloths, uniforms, and aprons to be cleaned on the premises? If yes, electric or gas dryer provided? Yes NO
Location of washing and drying facilities? _____
3. Location of storage area for clean clothes and linens? _____

EXTERIOR AREAS

- 1. Walking and driving surfaces constructed of _____ material.
- 2. Yes _____ NO _____ Walking and driving areas graded to drain?

EQUIPMENT

- 1. Yes _____ NO _____ List of all equipment, manufacturer name and model numbers accompanying plans?
- 2. Yes _____ NO _____ Shop drawings of fabricated food service equipment accompanying plans?
- 3. Yes _____ NO _____ Is nonportable table mounted equipment sealed to table or counter or elevated on legs 4 inches above table or counter?
- 4. Yes _____ NO _____ Is floor mounted equipment, unless readily movable, sealed to the floor; elevated on legs 6 inches above floor; OR installed on a raised platform of concrete or smooth masonry?
- 5. Yes _____ NO _____ Is sufficient space provided for easy cleaning between, behind and above each unit of fixed equipment OR the space between it and adjoining equipment units and adjacent walls or ceilings not more than 1/32 inch?
- 6. Yes _____ NO _____ Is equipment exposed to seepage sealed to adjoining equipment or adjacent walls and ceilings?
- 7. Yes _____ NO _____ Sneezeguards and other protection devices provided where food is exposed to the public?
Yes _____ No _____ Construction details submitted?
- a. Yes _____ NO _____ Three compartment stainless steel sink with drainboards on both right and left sides provided?
- 9. Yes _____ NO _____ Mechanical dishwasher provided?
Manufacturer and model number _____
Booster heater manufacturer and model number _____
Minimum temperature at which domestic hot water will be supplied to dishwasher booster heater? _____
Yes _____ NO _____ 1/4 inch IPS valve provided immediately upstream from the final rinse control valve to permit checking the flow pressure of the final rinse water?

REFRIGERATION

- 1. Refrigerated food storage capacity provided? _____ cubic feet
- 2. Frozen food storage capacity provided? _____ cubic feet
- 3. Yes _____ NO _____ Thermometers provided in each refrigeration unit graduated in 2° increments?

Plans and information submitted by:

(Signature)

Title: _____

Date: _____

Telephone: _____