



## **HOTEL/MOTEL PLAN REVIEW PACKET**

- All Hotels/Motels are required to obtain a Permit to Operate as a Hotel/Motel and may be required to obtain a Permit to Operate a Food Establishment as well.
- The application process begins with completing a Plan Review & an Application for a Permit to Operate. Please read the below instructions carefully.

### **Plan Review Requirements**

New Construction or Remodeling: Plan reviews are **due at least 45-days prior** construction start date.

New Establishment - in an existing structure: Plan reviews are **due at least 45-days prior** to desired opening date.

Prior Permitted Establishment with a permit that has been expired for more than 6 months: Plan reviews are **due at least 45-days prior** to desired opening date.

### **Please Note**

If your establishment is serving food, you may also be required to complete a **Food Establishment Plan Review (SF-35)** and a **Food Establishment Permit Application (SF-5)**. This requirement is based on the type of food being sold/served. Regulations can be found on our website. Please contact us for determination on this requirement.

If your establishment has a pool, you will need to **check the Recreational Water Facility box on the SG-49 application** to obtain a Permit to Operate a Recreational Water Facility. The fee will be added to your prorated invoice.

## Hotel / Motel Plan Review Fee

**Medium Establishment:** (50 rooms or less): **\$225.00**

**Large Establishment:** (>50 rooms): **\$325.00**

## Hotel/Motel Plan Review Submission - Checklist

Please use the checklist below to ensure your Plan Review submission is complete.  
Incomplete packages will be returned.

- Download the **Hotel / Motel Plan Review Application** from our website under Lodging.  
  
<https://www.jchdvw.org/environmental-health/>
- Complete** all pages of the Plan Review (pages 7 - 13)
- Include** a Floorplan drawing or blueprint of public areas, office, ice machines, and layout of each type of room/suite.
- Include** Plan Review Fee from above (see page 15 for payment options).
- Submit** all forms to: [Patti.J.Richardson@wv.gov](mailto:Patti.J.Richardson@wv.gov) or see page 15 for other submission options.

## **Application for a Permit to Operate Hotel/Motel (SG-49)**

You will also need to complete an Application for a Permit to Operate.

### **Permit to Operate Fees**

The Permit fees are separate from the Plan Review fees and are prorated, if needed, for the term remaining in the permit period. Once your completed packet has been received, you will receive an emailed invoice with all permit fees that are due. We cannot begin the permitting process until this invoice is paid in full.

## **Permit to Operate Hotel/Motel (SG-49) Submission -Checklist**

Please use the checklist below to ensure your submission is complete.

- Download the **Lodging Establishment Permit Application** from our website under Lodging.  
  
<https://www.jchdvw.org/environmental-health/>
- Include** your email address on the form.
- Submit** this form along with your Hotel/Motel Plan Review Packet.
- Watch your email** for the permit fee(s) invoice. We cannot begin the permitting process until this invoice is paid in full. You may use the Pay Online option once you receive this invoice. (see page 15)

## Hotel / Motel's SERVING FOOD

Contact our office if you are unsure if you need a food permit. If you do, please follow the checklist below.

### **Food Plan Review (SF-35) Submission - Checklist**

Please use the checklist below to ensure your Plan Review submission is complete.  
Incomplete packages will be returned.

- Download the **Food Establishment Plan Review Application** from our website under Food Establishments  
  
<https://www.jchdvw.org/environmental-health/>
- Complete** all pages of the Plan Review
- Include** a Menu.
- Include** a Floorplan drawing of kitchen layout.
- Include** All equipment specifications.
- Include** copies of CFPM(s) (see our website under Environmental Health/Food Handler's Card Requirements for information on obtaining a CFPM or Food Card).
- Be sure to let us know if your establishment is **servicing liquor**.
- Food Plan Review Fee is **waived if** you paid for the Hotel/Motel Plan Review.
- Submit** along with your Hotel/Motel Plan Review Packet.

## **If serving food, you will also need to complete an**

Application for a **Permit to Operate** a Food/Retail Establishment

### **Permit to Operate Fees**

The Permit fees are separate from the Plan Review fees and are prorated, if needed, for the term remaining in the permit period. Once your completed packet has been received, you will receive an emailed invoice with all permit fees that are due. We cannot begin the permitting process until this invoice is paid in full.

### **Permit to Operate a Food Establishment (SF-5) Submission -Checklist**

Please use the checklist below to ensure your submission is complete.

- Download the **Food Establishment Permit Application** from our website under Food Establishments

<https://www.jchdvw.org/environmental-health/>

- Include** your email address on the form.
- Submit** this form along with your Hotel/Motel Plan Review Packet.
- Watch your email** for the permit fee(s) invoice. We cannot begin the permitting process until this invoice is paid in full. You may use the Pay Online option once you receive this invoice. (see page 15)

## **Additional Forms**

**Lodging Establishment Permit Application (SG-49)**

**Food Establishment Checklist for New/ Remodeled/ Change of Ownership**

**Food Establishment Plan Review (SF-35)**

**Food Establishment Permit Application (SF-5)**

## **Website**

Additional forms mentioned can be found at the following link:

<https://www.jchdvw.org/environmental-health/>



## PLAN REVIEW FOR HOTELS/MOTELS

Name of Hotel/Motel \_\_\_\_\_

Address \_\_\_\_\_

Owner \_\_\_\_\_

Owner Address \_\_\_\_\_

Telephone \_\_\_\_\_ Start Date of Construction/Opening \_\_\_\_\_

Number of Rooms \_\_\_\_\_ Number of Employees \_\_\_\_\_

### SERVICES PROVIDED

1. Please put an X beside the services your facility will be providing.

- \_\_\_\_\_ Swimming Pool
- \_\_\_\_\_ Hot Tub(s)
- \_\_\_\_\_ Room Service
- \_\_\_\_\_ Restaurant on the premises
- \_\_\_\_\_ Bar or Lounge
- \_\_\_\_\_ Refrigerators in the rooms
- \_\_\_\_\_ Microwaves in the rooms
- \_\_\_\_\_ Cots or Roll-a-way beds for extra guests

## ANIMALS

2. Will animals be allowed in your facility?  YES  NO
3. If the answer to question #2 is yes, what types of animals will be allowed?

\_\_\_\_\_

4. How will the animal excrement be disposed of? \_\_\_\_\_

\_\_\_\_\_

## SLEEPING AREAS

5. Floors are constructed of what type of material? \_\_\_\_\_
6. Walls are constructed of what type of material? \_\_\_\_\_
7. Ceilings are constructed of what type of material? \_\_\_\_\_
8. Do single occupancy rooms contain a minimum of 70 square feet of floor space?  
 YES  NO
9. Do multiple occupancy rooms contain a minimum of 50 square feet of floor space per occupant?  
 YES  NO
10. Do sleeping rooms have a ceiling height of at least 7 feet measured from the floor?  
 YES  NO
11. Will mattresses including cots, or roll-a-way beds be provided with mattress pads or mattress covers?  
 YES  NO
12. How often will linens be changed and clean lined provided?  
Sheets \_\_\_\_\_ Towels & Wash cloths \_\_\_\_\_  
Blankets & Bedspreads \_\_\_\_\_
13. Will a storage area for excess clothing, luggage, or similar articles be provided in the rooms?   
YES  NO

## COMMUNICABLE DISEASE

14. Will a register containing a record of all occupants be maintained?  
 YES  NO



15. Will the register be available to the health officer and preserved for a minimum of twelve (12) months?  YES  NO
16. Will the register contain the name and address of the occupants and dates of occupancy?  YES  NO

## **GARBAGE AND REFUSE**

17. What type of garbage container(s) will be provided?  
 Dumpster with Lid      If so, how many? \_\_\_\_\_  
 Watertight, vermin proof trash cans with lids      If so, how many? \_\_\_\_\_
18. Will dumpsters or outside garbage containers be stored elevated, on metal racks, or on a smooth surface of non-absorbent material such as concrete or asphalt?  YES  NO
19. Will the garbage area be provided with a frost proof hose bibb and sanitary waste drain to the sewer?  YES  No
20. How often will trash be removed from the premises and who will provide this service?  
\_\_\_\_\_  
\_\_\_\_\_

## **HEATING AND VENTILATION**

21. Will the indoor space be ventilated by  natural or  mechanical means?
22. Will at least five (5) cubic feet of outdoor air per minute, per person, be provided?  YES  NO
23. Will the heating, ventilation, and air-conditioning systems be in compliance with the State Building Code?  YES  NO
24. Will intake and exhaust air ducts be located and maintained to prevent the entrance of dust, dirt, and other contaminating materials?  YES  NO
25. Will the mechanical ventilation system be designed so that the indoor temperature shall be no less than sixty-eight (68) degrees for heating and no more than seventy-eight (78) degrees for cooling?  YES  NO
26. Will the clothes dryer vent system be independent of all other systems and convey the products of the combustion and moisture to the outside?  YES  NO

## HOUSEKEEPING AND MAINTENANCE

27. Will a written plan be provided for a regular schedule of housekeeping tasks?  
 YES  NO
28. How often will the rooms be cleaned and sanitized? \_\_\_\_\_  
\_\_\_\_\_

## LAUNDRY

29. Will laundry be done on the premises?  YES  NO  
If yes, will a separate area, room or rooms be provided for this particular purpose?  
 YES  NO
30. Will soiled laundry be stored in non-absorbent, easily cleanable, covered containers, or covered laundry bags intended for laundry storage?  
 YES  NO
31. Where and how will clean laundry be stored? \_\_\_\_\_  
\_\_\_\_\_
32. List the brand names and model numbers of washers and dryers to be used.  
Washer: Brand \_\_\_\_\_  
Model Number \_\_\_\_\_  
  
Dryer: Brand \_\_\_\_\_  
Model Number \_\_\_\_\_

## LIGHTING

33. Will at least twenty (20) foot candles of light be provided in critical cleaning areas including, but not limited to, food preparation areas, utensil washing areas, toilet and bathing facilities, and laundry areas?  
 YES  NO
34. Will at least ten (10) foot candles of light be provided in normal cleaning areas including but not limited to, corridors, lobbies, janitor's closets, storage areas, and sleeping rooms?  
 YES  NO
35. Will at least forty (40) foot candles of light be provided in reading and activity areas including, but not limited to, classrooms, day rooms, playrooms, and meeting rooms?  
 YES  NO

36. Will light bulbs and fluorescent tubes be protected by effective shields or the use of shatterproof bulbs over food preparation areas, showers, gyms, pools, and any other area where safety is a concern?  
 YES  NO

## **PLUMBING**

37. Will exposed utility service lines and pipes be installed in a way that does not obstruct or prevent leaning of the floors, walls, and ceilings?  
 YES  NO
38. Will plumbing fixtures have a smooth impervious surface?  
 YES  NO
39. Will a service or utility sink be provided?  YES  NO
40. Will the plumbing be installed to meet the State Building Code?  
 YES  NO

## **SAFETY**

41. Does the design of the facility include sufficient lighting to minimize the hazards of falls, slipping, and tripping?  YES  NO
42. Will a first aid kit be provided?  YES  NO

## **SEWAGE**

43. Will sewage and liquid waste be disposed of by  public sewer or  individual sewage disposal system?

## **STORAGE**

44. Will poisons, chemicals, cleaning supplies, and other potentially hazardous items be properly labeled and stored in locked storage spaces not used for any other purpose?  
 YES  NO

## **TOILET, HANDWASHING, AND BATHING FACILITIES**

45. Floors are constructed of what type of material? \_\_\_\_\_
46. Walls are constructed of what type of material? \_\_\_\_\_
47. Ceilings are constructed of what type of material? \_\_\_\_\_
48. Are rooms containing toilet facilities vented to the outside air?  
\_\_\_\_\_ YES \_\_\_\_\_ NO
49. Will self-closing or metering faucets provide a flow of water for a minimum of fifteen (15) seconds without the need to reactivate the faucet?  
\_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_ N/A
50. Will toilet rooms used by women be provided with at least one covered waste receptacle?  
\_\_\_\_\_ YES \_\_\_\_\_ NO

## **VECTOR CONTROL**

51. Will outside doors be self-closing? \_\_\_\_\_ YES \_\_\_\_\_ NO
52. Will outside windows have screens? \_\_\_\_\_ YES \_\_\_\_\_ NO
53. Will screening material be less than sixteen (16) mesh to the inch?  
\_\_\_\_\_ YES \_\_\_\_\_ NO

## **WATER SUPPLY**

54. Will water be supplied from a \_\_\_\_\_ public supply or \_\_\_\_\_ private well?
55. Will hot and cold running water be supplied through a mixing valve or combination valve in areas where food is prepared or at all handwashing and bathing facilities?  
\_\_\_\_\_ YES \_\_\_\_\_ NO
56. Will hot water be heated to a temperature not less than 110 degrees Fahrenheit?  
\_\_\_\_\_ YES \_\_\_\_\_ NO
57. Are drinking fountains constructed of impervious material, have an angle-jet nozzle protected by a nonoxidizing mouth guard above the overflow rim of the bowl, and equipped with a pressure regulating valve? \_\_\_\_\_ YES \_\_\_\_\_ NO
58. Will \_\_\_\_\_ glass or \_\_\_\_\_ plastic drinking cups be provided in the rooms?
59. Will a \_\_\_\_\_ disposable or \_\_\_\_\_ easily cleaned and sanitized water pitcher be provided in the rooms?

60. What is the source of ice provided to the customer? \_\_\_\_\_  
\_\_\_\_\_

61. Will ice intended for self-service be dispensed from automatic self-service ice dispensing equipment?  
\_\_\_\_\_ YES \_\_\_\_\_ NO

**FOOD SERVICE**

62. Will coffee makers be provided in the rooms? \_\_\_\_\_ YES \_\_\_\_\_ NO

63. How and where will glasses, water pitchers, and/or coffee machines be properly washed and sanitized? \_\_\_\_\_  
\_\_\_\_\_

64. Will food, other than from vending machines be offered to the guests?  
\_\_\_\_\_ YES \_\_\_\_\_ NO

65. If the answer to #63 is yes, what food will be provided? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\* Any food offered to patrons that is not prepackaged and non-potentially hazardous will require appropriate refrigeration and the facilities to properly clean and sanitize equipment and utensils.

**Owner's Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## Payment Options and Submission

**Check Payments:** Please make checks payable to Jefferson County Health Department and include a phone number on the top of the check. Mail along with your completed packet to the address above or drop in the lock box outside our back door marked Environmental.

**Credit Card Payments:** **There is a 3.99% fee on all credit card payments.**

**Pay Via Form Below:** Complete the credit card section below and email, fax, mail or drop in the lock box outside our back door marked Environmental, along with packet.

**Pay Online:** This option is only available for the permit fee piece, as you will need to input your invoice number. Plan Review fees are due at time of submission.

Visit our website <https://www.jchdvw.org/environmental-health/>

and click on [Pay for PERMITS Online](#)

### **PLEASE NOTE:**

We are unable to accept credit card payments over the phone.

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### **Credit Card Payment:**

**There is a 3.99% fee on all credit card payments.**

Card Holder Name: \_\_\_\_\_

Account # \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_ Amount: \_\_\_\_\_

Signature: \_\_\_\_\_