

Food Service Plan Review Questionnaire

Establishment Name		E-mail	
Owner's Name		Phone #	
Physical Address			
Mailing Address			
City, State, Zip			

Please complete and return the following questionnaire (front & back) along with the layout plan (drawn to at least a minimum scale of 1/4" = 1 foot) depicting the kitchen area, at least 30 days prior to the beginning of any construction. Please refer to the kitchen layout example.

Estimated Completion Date: Seating Capacity:

Menu Description: _____

Will facility utilize any specialized food processes? Yes No

If yes, please indicate below:

Reduced-oxygen packaging (ROP) including cook/chill or sous vide Drying Sprouting
 Curing/Brining/Fermenting Food additive to render food non-potentially hazardous (e.g. vinegar for sushi)
 Smoking (for food preservation) Live molluscan shellfish tank Other: _____

1. Has a scaled drawing showing the layout of the food service establishment (especially the preparation and dispensing area) been provided to the State Health Department for review? Yes No

Date Submitted

2. Please describe the floor, wall, and ceiling coverings in the kitchen:

Floor:	
Wall:	
Ceiling:	

3. Are floor/wall junctures sealed? Yes No

4. List what cooking equipment will be used: _____

5. Are commercial hood ventilation systems provided over all cooking equipment? Yes No N/A

If no, please describe:

6. Does the hood contain removable metal grease filters? Yes No N/A

7. Does the hood extend a minimum of 6" over each side and the front and back of all cooking equipment? Yes No N/A

8. What type of material is used on the following surfaces:

Prep/Work Tables	Dry Storage Shelves
Counter Tops	Cooler/Freezer Shelves

9. Are all lights in the food preparation area, display area, walk-in coolers, and utensil washing areas provided with protective shields or shatterproof bulbs? Yes No

10. What type(s) of utensil washing facilities are provided? Commercial Dishwasher 3-Compartment Sink

11. **Make & Model of Dishwasher:** **Chemical Sanitizer** **Hot Water Sanitizer**

Note: In those establishments equipped with a commercial dishwasher, it is recommended that a three-compartment sink also be provided. This will enable the business to continue operation should the commercial dishwasher malfunction. A booster heater must be provided on hot water sanitizing units. Adequate drain boards/dish tables must be provided for the commercial dishwasher.

12. **Are attached drain boards provided for the 3-compartment sink?** **Yes** **No** **N/A**

Note: A drain board area of at least 18 inches in length and as wide as the sink must be provided.

13. **Is a separate hand-washing lavatory provided in the food preparation area with hot and cold water delivered through a mixing faucet?** **Yes** **No**

Note: Additional hand-washing lavatories may be required depending on the size of the kitchen and the convenience and accessibility of the lavatories provided.

14. **Is a separate prep sink or vegetable sink provided for washing and rinsing of food items?** **Yes** **No** **N/A**

A. Has it been plumbed with a physical air gap on the drain? **Yes** **No**

Note: A prep sink is required in all full-service food service establishments and those in which preparation requires the soaking, washing or draining of food products. All prep or vegetable sinks must be installed with a physical air gap on the drain. Dipper wells will be required for storage of ice cream scoops/utensils.

15. **Is a mop sink or janitor's sink provided?** **Yes** **No**

Where is it located?

Note: In all new or extensively remodeled food service establishments, a separate janitor's sink or utility sink must be provided.

16. **Number of Restroom Fixtures:**

	Men's	Women's
Number of Restrooms		
Toilets		
Urinals		
Lavatories		

17. **Are all restrooms mechanically vented to the outside?** **Yes** **No**

Do all restrooms have self-closing doors? **Yes** **No**

18. **Are hot holding units provided?** **Yes** **No** **If Yes, what type?**

19. **How many cubic feet of refrigeration is provided?** Cubic Feet

Note: A visible thermometer must be provided in each refrigeration unit.

20. **How many cubic feet of freezer space is provided?** Cubic Feet

21. **Have all employees received training in proper food handling techniques and safe employee practices?** **Yes** **No**

Please note the American's with Disabilities Act (ADA) regulations are to be followed for all facilities. ADA requirements are regulated and enforced by the US Department of Justice. For more information, please call the ADA hotline at 1-800-514-0301 or visit their website at <http://www.ada.gov/>

**SEND YOUR COMPLETED
QUESTIONNAIRE AND LAYOUT PLAN
TO:**
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Fax (605) 773-5683