



R. Joseph Ebel MS, MBA, REHS  
Health Commissioner

## FOOD FACILITY REVIEW APPLICATION

New Facility       Remodel       Change of Owner       Equipment Change

Food Service Operation (restaurant, cafeteria)       Retail Food (grocery, convenience store)

Name of Facility: \_\_\_\_\_

Address of Facility: \_\_\_\_\_

Telephone (*if available*): \_\_\_\_\_ email: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ email: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Title (*owner, manager, architect, etc.*): \_\_\_\_\_

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

Telephone: \_\_\_\_\_ email: \_\_\_\_\_

Contact and apply for permits from the following agencies:

**Fairfield County Regional Planning • Plumbing • Zoning • Electric • Building • Fire**  
(See page 6 for contact information.)

Total Square Feet of Facility: \_\_\_\_\_

Projected start date of Project: \_\_\_/\_\_\_/\_\_\_ Projected completion date of Project: \_\_\_/\_\_\_/\_\_\_

Please enclose the following documents:

- Proposed Menu** (including seasonal, off-site, carryout and banquet menus).
  - \* **Consumer warnings shall be provided as required for consumption of animal foods that are raw, undercooked, or not otherwise processed to eliminate pathogens. This disclosure must be on the menu or, in the absence of a menu, be presented in writing to consumers, and identify the food items that require disclosure and specify that those food items are, or contain raw or undercooked animal-derived foods.**
  
- Manufacturer Specification sheets** or a detailed list of make and model numbers for each fixture and piece of equipment shown on the plan. Equipment must be certified or classified for sanitation by an ANSI accredited certification program. Example: NSF, UL, ETL.
  
- All small wares/counter top equipment must be commercial grade and be listed on your equipment list.**
  
- Site plan** showing location of business in building; location of building on site including alleys, streets, and location of any outside equipment (dumpsters, grease trap, utility connections including water and sewer lines).
  
- Plan drawing** drawn reasonably **to scale** on a minimum of 8½ X 11 inch paper. Drawing should include entire establishment, entrances & exits, location of all fixtures & equipment, **plumbing**, electrical, mechanical and ventilation. Each piece of equipment must be clearly labeled with its common name. Label and locate each hand sink, three compartment sink, food preparation sink, mop sink, and grease trap. Show dry storage area, chemical storage, mop/broom storage, garbage storage, restrooms and basements.
  
- Finish schedules** showing surface finishes for floors, walls, coved juncture bases, ceilings, counter tops, etc. **Provide stainless steel exhaust hood and stainless steel on walls behind grease producing equipment.**
  
- Lighting plan.** Provide lighting schedule with protectors;
  - a. At least 10 foot candles at a distance of 30 inches above the floor, in walk-in refrigeration units and dry food storage areas and in other areas and rooms during periods of cleaning;
  - b. At least 20 foot candles:
    - (1) At a surface where food is provided for consumer self-service such as buffets and salad bars or where fresh produce or packaged foods are sold or offered for consumption;
    - (2) Inside equipment such as reach-in and under-counter refrigerators;
    - (3) At a distance of 30 inches above the floor in areas used for hand washing, ware washing, and equipment and utensil storage, and in toilet rooms; and
  - c. At least 50 foot candles at a surface where a food employee is working with food or working with utensils or equipment such as knives, slicers, grinders, or saws where employee safety is a factor.
  
- Check, cash or money order** for facility review fee. Please call 740-652-2813 for current fee.

**FOOD SUPPLIES:**

What are the projected frequencies of deliveries\_\_\_\_\_

Number of refrigeration units\_\_\_\_\_

Number of freezer units\_\_\_\_\_

Dimensions of dry storage area \_\_\_\_\_

**\* Food must be stored on shelving at least 6 inches off the floor. Raw animal products must be stored below ready-to-eat foods in refrigerators.**

**THAWING:**

Describe your means of thawing frozen foods.

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**HOT HOLDING:**

How will you maintain hot holding.

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**COLD HOLDING:**

How will you maintain cold holding.

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**COOLING:**

How do you plan to properly cool foods from 135 degrees to 70 degrees (within 2 hours) and from 70 degrees to 41 degrees (within 4 hours).

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**REHEATING:**

Will potentially hazardous foods be reheated in bulk more than once a week?  YES  NO

Describe how foods will be rapidly reheated (within 2 hours) to 165 degrees F for hot holding?

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**PREPARATION:**

How many employees will obtain **Ohio** Person-in-charge (PIC) training? \_\_\_\_\_

Is there written verification that employees are informed of their responsibility to report, to the person in charge, information about their health as it relates to diseases transmissible through food (OAC 3717-1-02.1)?

YES  NO

Are there written procedures for employees to follow when responding to vomiting or diarrheal events in the facility? Is a kit provided that includes, detailed instructions, PPE's, cleaning equipment, supplies and proper disinfectant?

YES  NO

Will the facility be serving a highly susceptible population? (Hospital/nursing home)  YES  NO

**FINISH SCHEDULE**

Indicate which materials (quarry tile, stainless steel, 4" plastic coved molding, etc.) will be used in the following areas:

	Floor	Coving	Walls	Ceiling
<b>Kitchen</b>				
<b>Bar</b>				
<b>Food Storage</b>				
<b>Toilet/Dressing Rooms</b>				
<b>Mop Sink Area</b>				
<b>Ware washing Area</b>				
<b>Walk-in Refrigerators and Freezers</b>				

**WATER SUPPLY**

Is water supply: public  or private

**\*If water supply is private, please provide copy of written approval and acceptable water results.**

Is ice made: on-premises  purchased commercially

Does ice machine drain provide for an air gap?  YES  NO

What is the capacity of the hot water tank? \_\_\_\_\_

**SEWAGE DISPOSAL/REFUSE**

Is sewage system: public  or private

**\* If private, please provide a copy of written approval.**

Are grease traps provided?  YES  NO

List size and location of grease traps \_\_\_\_\_

Will a dumpster be used  YES  NO

Size \_\_\_\_\_ Frequency of pickup \_\_\_\_\_ Contractor \_\_\_\_\_ Dumpster surface \_\_\_\_\_

**GENERAL**

**Anyone who applies pesticides in public areas must be a licensed pesticide applicator or be a “trained service person” working under a licensed applicator. A license is required to apply any pesticide, including general use products.**

Are all toxics for use on the premise or for retail sale (this includes personal medications), stored separate from food preparation and food storage areas?

Will all outside doors be screened, self-closing & rodent proof?  YES  NO

Do all openable windows have a minimum #16 mesh screening?  YES  NO

Is a laundry washer and dryer available for linens/wiping cloths?  YES  NO

If laundered off site, name of contractor \_\_\_\_\_

Designated areas (lockers, cabinets) are required for employee personal items (coat, purse)

Describe location and type.

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**VENTILATION:**

List where ventilation hood systems will be installed and how they will be cleaned.

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**SINKS**

Is a mop sink present  YES  NO

Is a food preparation sink present?  YES  NO

Is the food preparation sink **indirectly** plumbed?  YES  NO

**DISHWASHING FACILITIES**

Is the three compartment sink **indirectly** plumbed?  YES  NO

Does the largest pot and pan fit into each compartment of the three-compartment sink?  YES  NO

Are there drain boards on both ends of the three-compartment sink?  YES  NO

What type of sanitizer is to be used at the 3-compartment sink?

Chlorine

Iodine

Quaternary ammonium

Will a dishwasher also be used for warewashing  YES  NO

Dishwasher - Type of sanitization used:

Hot water: Max Temp \_\_\_\_\_ Pressure \_\_\_\_\_  Booster heater  YES  NO

Chemical: Chlorine  Quaternary ammonium

Is ventilation provided?  YES  NO

**\* All dish machines must have templates with operating instructions and temperature/pressure gauges that are accurately working.**

**\*Dish machines with automatic dispensing of detergent & sanitizer must have a visual means to verify that detergent & sanitizer are delivered and a visual or audible alarm to signal if detergent & sanitizer are not delivered.**

## **HANDWASHING/TOILET FACILITIES**

Are hand washing facilities available in all food preparation **and** warewashing areas?  YES  NO

**\*Hot and cold running water, hand soap, drying facilities, a trashcan, and signage must be available at all hand washing stations.**

Are covered waste receptacles available in women's restrooms?  YES  NO

Are all toilet rooms equipped with adequate ventilation?  YES  NO

**It is the applicant's responsibility to ensure that all required information is included in the facility review packet. The health department will give ONE courtesy phone call to notify the applicant of missing information. Incomplete facility review packets will be discarded after 4 months.**

**Completed plans received by the Fairfield Department of Health (FDH) will be acted upon within 30 days.**

Once you receive a plan approval letter from FDH, you can begin construction and installation in the facility.

After plans are approved and before licensure, the following items must be submitted to the Fairfield Department of Health:

- Letter/statement from municipal wastewater treatment authority concurring that grease trap meets their requirements.
- Copy of occupancy permit. Final inspection cannot be scheduled until this is received.
- Documentation of Person-in-Charge Certification in Food Protection (OAC 3701-21-25) for at least one person-in-charge per shift.
- Documentation of Manager Certification in Food Protection (OAC 3717-1-02.4) for at least one manager or supervisor for all Risk Level 3 & 4 facilities.
- Food Facility License application and fee.

Call the FCHD to schedule your pre-licensing inspection when construction and installation are completed.

## Useful Contacts

### Fairfield Department of Health, Food Program Contacts:

Sheila Wolfe, REHS  
740-652-2820  
[sheila.wolfe@fairfieldcountyohio.gov](mailto:sheila.wolfe@fairfieldcountyohio.gov)

Kelsey Nein, EHSIT  
740-652-2814  
[kelsey.nein@fairfieldcountyohio.gov](mailto:kelsey.nein@fairfieldcountyohio.gov)

Breanna Boudinot, EHSIT  
740-652-2818  
[breanna.boudinot@fairfieldcountyohio.gov](mailto:breanna.boudinot@fairfieldcountyohio.gov)

Visit [www.agri.ohio.gov](http://www.agri.ohio.gov) or [www.odh.ohio.gov](http://www.odh.ohio.gov) for a copy of the Ohio Uniform Food Safety Code

### Water & Sewage

Ohio EPA Central District Office 614-728-3873

**Fire** Lancaster Fire Prevention 740-687-6640  
Pickerington Fire Dept. 614-837-4123  
State Fire Marshall 614-752-8200

**Building** Lancaster Building Department 740-687-6649  
Pickerington Building Regulation Dept. 614-833-2221  
Dept. of Industrial Relations 800-523-3581

**Plumbing** Lancaster Building Department 740-687-6649  
Pickerington Building Regulation Dept. 614-833-2221  
Lithopolis 614-837-2031  
Canal Winchester 614-837-7493  
Fairfield Dept. of Health 740-652-2800

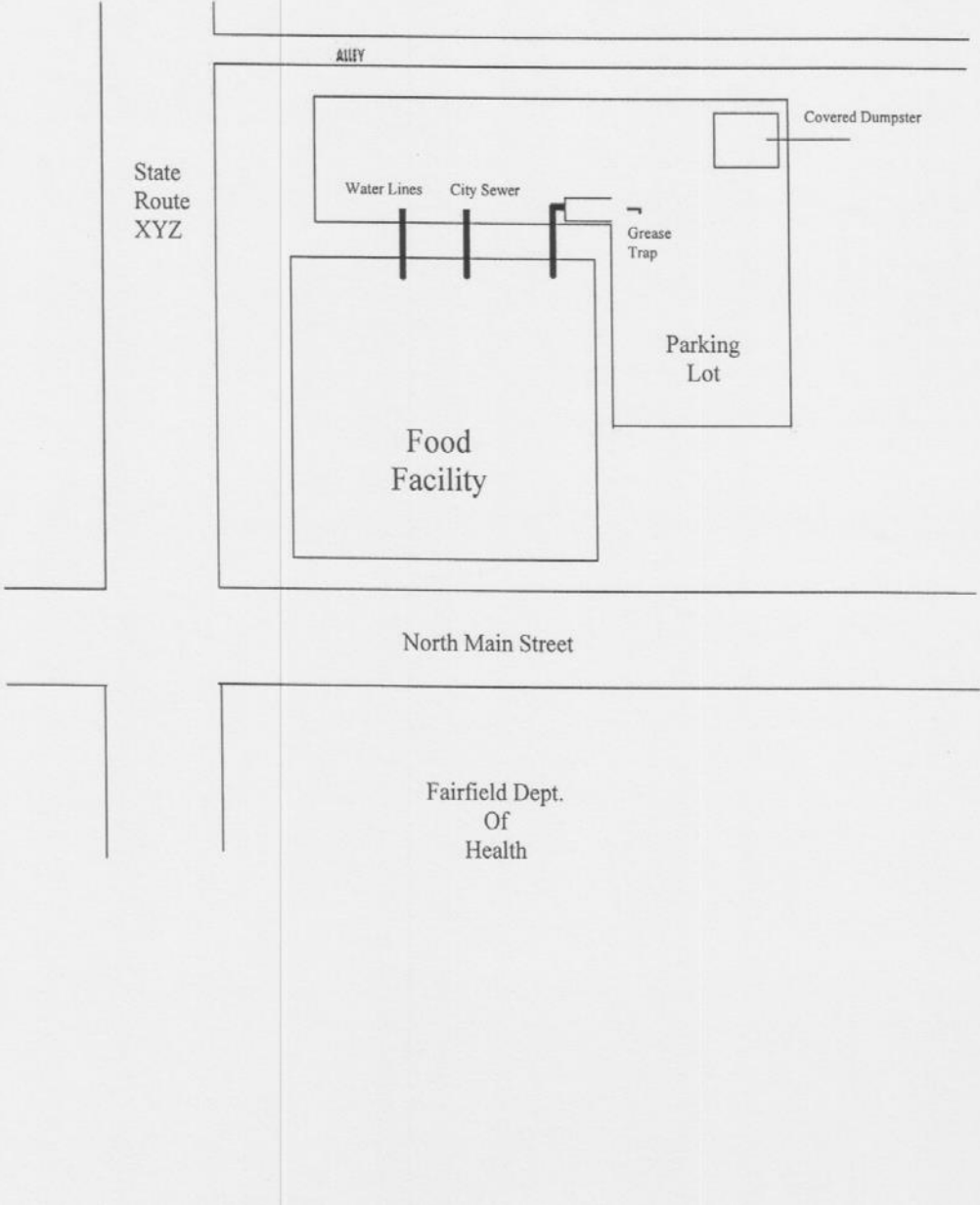
**Wastewater treatment** Lancaster Water Pollution Control 740-687-6664  
Pickerington Utilities 614-833-2221  
Fairfield Co. Utilities 740-652-7120  
Canal Winchester 614-837-2254

**Liquor Control** ..... 614-644-2455

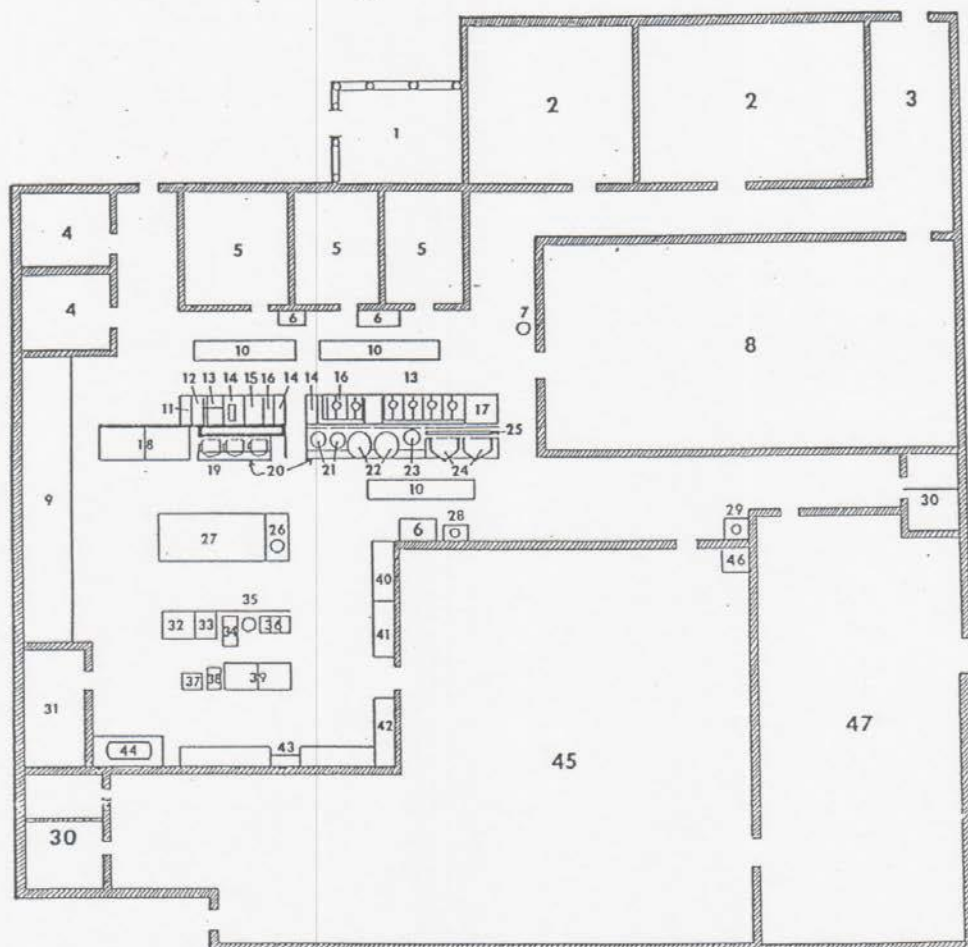
**\*NOTE that if your facility will have a liquor license, all information must match exactly on both the liquor license and the food license! Make a copy of your liquor license application so you have the information when you fill out your food license application.**



# Example Site Plan



# Example Floor Plan



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|------------------------------------|------------------------------------|-----------------------------------|
| 1. Refuse Storage                  | 17. Char-glo Broiler               | 33. Dough Mixer – 20 Qt.          |
| 2. Walk-in Freezer                 | 18. Roast Oven                     | 34. Dough Mixer – 80 Qt.          |
| 3. Receiving Area                  | 19. Vegetable Steamers             | 35. Steam Jacketed Kettle 30 Gal. |
| 4. Employee Lockers and Rest Rooms | 20. Exhaust Hoods                  | 36. Hot Plates                    |
| 5. Walk-in Refrigerators           | 21. 60 Quart Steam Jacketed Kettle | 37. Cooling Rack                  |
| 6. Reach-in Refrigerator           | 22. 80 Quart Steam Jacketed Kettle | 38. Convection Oven               |
| 7. Potato Peeler                   | 23. Tilting Kettle                 | 39. Bake Ovens                    |
| 8. Dry Food Storage                | 24. Tilting Skillets               | 40. Ice Machine                   |
| 9. Clean Dish & Utensil Storage    | 25. Kettle Filler                  | 41. Water Station                 |
| 10. Prep Tables                    | 26. Vegetable Sink                 | 42. Scrap and Pre-rinse           |
| 11. Open Burner                    | 27. Salad/Sandwich Prep            | 43. Dish Machine                  |
| 12. Range Grill Top                | 28. Handwashing Sink               | 44. Pot and Pan Sink              |
| 13. Salamander Broiler             | 29. Utility Sink                   | 45. Main Dining                   |
| 14. Deep Fat Fryer                 | 30. Public Rest Rooms              | 46. Waitress/Waiter Station       |
| 15. Broiler                        | 31. Office                         | 47. Banquet Room                  |
| 16. Spreader                       | 32. Spice Rack                     |                                   |