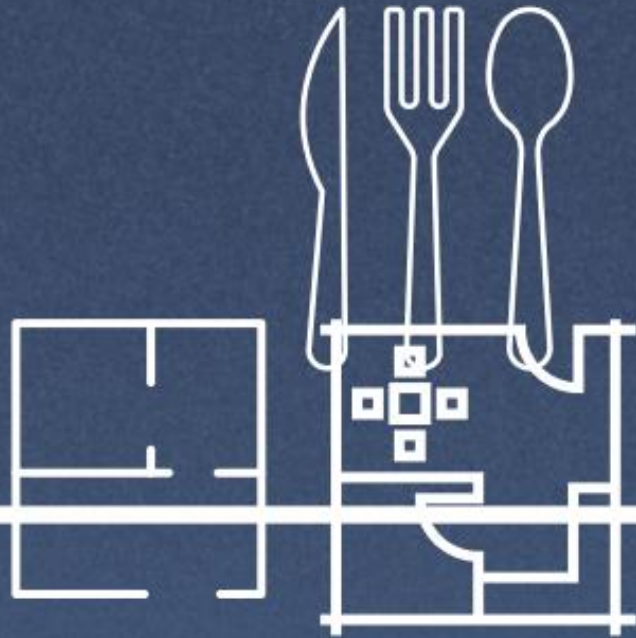


Food Business
**Plan Review
Application**



**Facility Layout &
Equipment Specifications**

Clark County Combined Health District
529 E. Home Rd., Springfield, Ohio
937-390-5600
environmental@ccchd.com



LICENSING

All retail food businesses in Clark County are required to have a food service operation or retail food establishment license issued by Clark County Combined Health District. If you plan to open a restaurant or retail food facility, remodel a facility, or change your license states (e.g. change of menu, equipment, or process), contact CCCHD for any questions you may have in regard to plan approval or licensing.

GETTING STARTED

All new retail food businesses and those performing extensive alterations or remodeling must complete the plan review process. Here we will walk you through all of the necessary steps to obtain a food service license in Clark County.

Step 1: Submit Plans (at least 30 days prior to construction)

Including the following:

- One (1) complete set of drawings of the facility
- Properly completed application (this document)
- Menu or list of food and beverage items to be sold
- Plan review fee, as determined by CCCHD (list attached)

Step 2: Plan Review Process

- Within 30 days after plans and fees are submitted, CCCHD will review the plans.
- Plan may require additional information or changes - in this case you will be contacted

Step 3: Plan Approval Process

- A letter will be sent informing you that the plans have been approved.
- Plan approvals not acted upon expire in one (1) year, unless the facility is under construction.

Step 4: Construction

- Ensure that all contractors and sub-contractors are licensed.
 - City of Springfield Building Department – 937-324-7389
 - Clark County Community Development – 937-521-2160 (County Inspection Services)
 - Clark County Combined Health District – 937-390-5600 (Plumbing Inspections)
 - Ohio Environmental Protection Agency – 937-285-6357
- Ensure that contractors obtain necessary permits through the required departments.
- Contact CCCHD if you have questions or need a walk through inspection during construction

Step 5: Inspections:

- Obtain signatures (“sign offs”) from all building inspectors before contacting CCCHD for an opening inspection – arrange for this inspection once approval for a **Certificate of Occupancy** has been given.
- CCCHD requires a minimum of 2 business days’ notice to schedule an inspection (based on the volume, it may take up to a week). Though we will attempt to accommodate your schedule, call early to avoid scheduling conflicts and allow time for re-inspection if necessary. **Call 937-390-5600 to schedule the inspection.**

PLEASE KEEP THIS FOR YOUR REFERENCE

EQUIPMENT REQUIREMENTS

As per OAC 3717-1-04 (KK) all equipment used must be listed as commercial and must be certified by a recognized testing agency (e.g. NSF, UL sanitation). No household equipment is permitted.

Applicable facilities are required to have a hand washing sinks, which are located in each service station, food prep, bar, and dishwashing area. All sinks must be equipped with soap and disposable towels or hand dryers, and have signs reminding employees to wash hands. A handwashing sink located in the restroom will not fulfill hand sink requirements.

All facilities are required to have a sink designated only for cleaning of mops, and cleaning tools and for disposal of mop water located on each floor with a food preparation area. The mop sink must include a faucet and drain and used for no other purpose. This sink shall have hooks or other means to allow mops to air dry.

A 3-compartment sink designated for dishwashing is required in any operation using dishes or utensils. The 3-compartment sink must be located within the same work area where food is prepared. The sink shall have curved interior edges and at least 3 sinks for washing, rinsing, and sanitizing. The sinks shall also have two drain boards, one for collection of dirty dishes and the other for air drying. One drain board is allowed if it is on the dirty dish side of the sink and shelving is above or next to the sink. Each compartment of the sinks shall be large enough to submerge the largest piece of equipment. Sizing of grease interceptors are not determined by our department.

A food preparation sink is required for the processing of produce or other foods. Processing can include washing, soaking, thawing and using ice baths for cooling. A food preparation sink must have an indirect drain, specifically an air break, to prevent backflow from a sewage system into equipment which food is placed. Food processing is not allowed in a hand sink or a dishwashing sink. If a food preparation sink is not available, a facility will be limited to using only prewashed vegetables.

EQUIPMENT STANDARDS

All equipment and plumbing fixtures must be approved for food service by an approved food service equipment testing agency. The following are examples of symbols for some of the agencies/companies that are approved to approve food service equipment:



PLEASE KEEP THIS PAGE FOR YOUR REFERENCE

FOOD PLAN REVIEW APPLICATION

Contact Information

Food Facility Name: _____
Address: _____ Phone: _____
City: _____ State: _____ Zip: _____
Name of Operator (Owner): _____ Phone: _____
Contact for Plans: _____ Phone: _____
Business Name: _____ E-mail: _____
Address for Approval Letter: _____
City: _____ State: _____ Zip: _____

Plan Review Type:

- New Establishment
- Full Remodel (torn down & rebuilt, full inside demo)
- Remodel/Alteration of Existing Food Establishment
- Micromarket

Estimated Date Construction Will Begin: _____

Estimated Opening Date: _____

Days/Hours of Operation: _____

Type of Establishment (check all that apply)

- | | | |
|--------------------------------------------|----------------------------------|----------------------------------------------|
| <input type="checkbox"/> Restaurant/Diner | <input type="checkbox"/> Bakery | <input type="checkbox"/> Child Care Facility |
| <input type="checkbox"/> Meat Market | <input type="checkbox"/> Caterer | <input type="checkbox"/> Long Term Care |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Retail | <input type="checkbox"/> Deli |
| <input type="checkbox"/> Coffee Shop | <input type="checkbox"/> Bar | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Grocery Shop | <input type="checkbox"/> School | |

Types of Service:

- | | | |
|-----------------------------------|------------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Sit Down | <input type="checkbox"/> Out of Store Catering | <input type="checkbox"/> Delivery |
| <input type="checkbox"/> Take Out | <input type="checkbox"/> Buffets | <input type="checkbox"/> Other: _____ |

Square Feet Devoted to Food: _____

Water Supply: Municipal Well Other*: _____

Sewage Disposal: Sanitary Sewer Semi Public*

*Please provide documentation of approval from Ohio EPA

INTERNAL USE ONLY:

Date Received: _____ Received by: _____ Amount Paid: _____ Receipt Number: _____

PLAN REVIEW COMPONENTS

The plans submitted to CCCHD must be legible, in English, and include the following list of important. Please indicate with a checkmark, that the following are included or indicated if not applicable (n/a). **Lack of complete information will delay plan approval and or delay your business opening.**

- Site Plan
 - Show designated area for garbage and grease dumpsters
 - Show the location of the building and surrounding streets
- Proposed menu or list of food and beverage items
- Facility floor plan, drawn to scale, to include
 - Location of dry goods, chemical, and personal belongings
 - Location of entrances and exits
 - Location of hand sinks available in food prep areas and restrooms
 - Location of 3-compartment dish washing sink
 - Location of dish machine (indicate high or low)
 - Location of food preparation/vegetable washing sink
 - Location of utility sink/mop sink
 - Location of Equipment
- Equipment list, include make and models numbers. (*Commercial equipment only – NSF, ETL, etc.)
 - Include elevations or indicate installation of equipment (casters, legs, fixed, sealed)
- Basic plumbing drawings including the following:
 - Show Grease trap location
 - Show all indirect plumbing connections and floor drains and sinks
- Interior Finish Schedule of all portions of facility with materials for floors, walls, ceilings, and coving
- Lighting plan
- Ventilation Hoods
 - ANSI approved fire suppression systems over grease producing equipment.

FOOD HANDLING PROCESS

Answer all questions that apply to your facility or write N/A

How will bulk foods be repackaged into smaller packages?

Describe the methods of how hot foods will be held at 135°F or above.

Describe the methods of how hot foods will be rapidly cooled to 41°F or below.

Describe how hot foods will be rapidly reheated to 165°F or above

How will frozen foods will be thawed?

How will raw poultry, meats, and seafood and ready-to-eat foods be protected from cross contamination?

Will fruits and vegetables be washed in the establishment, or will all fruits and vegetables be received pre-washed and pre-cut?

How will bare-hand contact with ready-to-eat foods be avoided?

Will there be any menu items served raw or undercooked? (If so, consumers must be advised of the increased risk of food borne illness.)

Will catering be conducted?

Will foods be prepared off site?

Will food be transported to another location?

Will there be reheating of left-over food items? If so, how many days?

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?

What sanitizer will be used? What concentration?

EDUCATION REQUIREMENT

As of March 1, 2010 the Ohio Revised Code requires that at least one person in charge per shift of a food service operation or retail food establishment must have attended the person in charge training or an equivalent approved training.

As of March 1, 2017, all facilities with a risk level 3, or risk level 4 food license are required to have at least one person with a valid Level Two certification in food protection who has supervisory and management responsibilities and authority to direct and control food preparation and service per Ohio Administrative Code 3717-1-02.4(A)(2).

PLAN REVIEW SUBMISSION

This application is complete and accurate to the best of my knowledge. I understand that incomplete plans may delay the plan approval process. I am submitting a set of plans which include the required drawings, a menu, and the plan review fee. I understand it may take up to 30 days to review. A separate license fee will be needed upon final inspection approval.

Signature of applicant: _____

Date: _____

Submit plans to: Clark County Combined Health District
Retail Food Business Plan Review
529 E Home Road
Springfield, OH, 45503

Questions: Phone: 937-390-5600 Fax: 937-390-5625

Interior Finishes

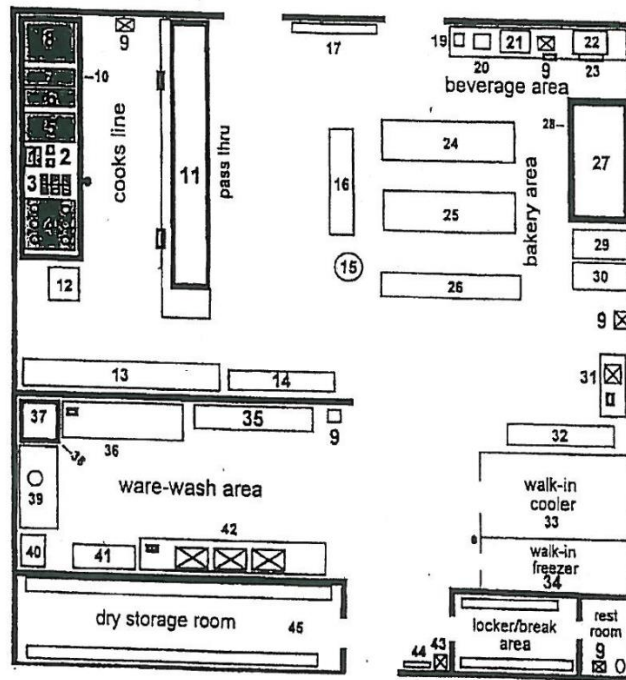
Use the following chart to indicate all interior finishes (unless already included in plans)

This information is included in plans submitted

Room Name	Floors	Walls	Ceiling	Coving
Example: Kitchen	Quarry Tile	FRP	Vinyl Acoustical Tile	6" quarry tile

All surfaces must be smooth and easily cleanable. Contact CCCHD if you have questions regarding whether specific surfaces are approved for use in a food service operation.

EXAMPLE OF HOW TO KEY EQUIPMENT LIST TO FLOOR PLAN



Equipment (make and model #)

- | | | |
|-------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------|
| 1. Cheese melter (ABC #123) | 16. Shelving unit | 32. Stainless prep table |
| 2. Microwave (XYZ #34) | 17. Bread shelving racks | 33. Walk-in cooler (COLD #AZ1) |
| 3. Steamtable (HOT #A1) | 18. Dining area | 34. Walk-in freezer (COLD #AZ3) |
| 4. Stove (AOK #22) | 19. Coffee maker (ABC #16) | 35. Drying shelf |
| 5. Griddle (AOK #Q17) | 20. Tea maker (ABC #87) | 36. Clean drainboard |
| 6. Fryer (ABC #55) | 21. Soda machine (PDQ #2A) | 37. Dishmachine (Magic #15) |
| 7. Fryer (ABC #55) | 22. Espresso machine (ABC #5) | 38. Hood, type II (Ezair #17) |
| 8. Charbroiler (HOT #A7) | 23. Undercounter refrigeration unit (COLD #A3) | 39. Dirty drainboard w/ sprayhose, & garbage disposal |
| 9. Hand sink | 24. Bakers table | 40. Dirty dish rack |
| 10. Hood, type I (Ezair #99) | 25. Bakers table | 41. Drying shelf |
| 11. Refrigerator/freezer make-table unit with pass-thru and shelf. (Cold #10) | 26. Shelving unit | 42. 3-comp. sink w/ 36" drainboards |
| 12. Stainless steel table | 27. Bake oven (JAM #33) | 43. Mop sink |
| 13. Sliding 3 door refrigeration unit (Cold #12) | 28. Hood, type II (Ezair #35) | 44. Chemical storage shelf |
| 14. Shelving unit | 29. Proof cabinet (ABC #T2) | 45. Shelving |
| 15. Mixer (XYZ #q23) | 30. Proof cabinet (ABC #T2) | Floor sink |
| | 31. Vegetable prepsink & 18" drainboard | Floor drain |

RISK LEVELS

The size of the facility and the risk level determine the fee that shall be paid. Below are examples of types of operation and food processes that are commonly found in each risk level. If you have a question regarding your risk level, please contact CCCHD at (937)-390-5600.

Risk Level 1: self-service fountain drinks; prepackaged non-TCS foods; pre-packaged refrigerated or frozen TCS foods; pre-packaged non-TCS foods; baby food/formula.

Risk Level 2: coffee; handling, heat treating, or preparing non-TCS foods; holding for sale or serving TCS foods at the same proper temperature at which it was received; heating individually packaged, commercially processed foods for immediate service.

Risk Level 3: handling, cutting, or grinding raw meat products, cutting or slicing ready-to-eat meats and cheeses; assembling or cooking TCS foods that are immediately served, held hot/cold, or cooled; operating a heat treatment dispensing freezer; reheating only in individual portions, heating of a product, from an intact, hermetically sealed package and holding it hot; doing reduced oxygen packaging.

Risk Level 4: Reheating bulk quantities of leftover TCS foods; catering to off-site events; using time in lieu of temperature; serving a highly susceptible population; serving raw or undercooked poultry, beef, pork, or seafood; acidifying white rice; smoking or curing meats.

FEE SCHEDULE as of 2022

PLAN REVIEW FEES	<25,000 square feet	>25,000 square feet
Commercial	\$298.00	\$596.00
Non-Commercial	\$149.00	\$298.00
Micro Market	\$298.00	N/A