

FOOD ESTABLISHMENT PLAN REVIEW
APPLICATION

CATEGORY I & II

Date: _____

CONTACT INFORMATION

Name of establishment: _____

Address: _____

City: _____ **Zip code:** _____

Phone: _____

Fax: _____

Email address: _____

Name of owner/licensee: _____

Mailing address: _____

City: _____ **Zip code:** _____

Phone: _____

Email address: _____

Reason for plan review: New establishment _____, Licensee change _____, Remodel _____

BUILDING DESIGN AND OPERATION

Establishment type: Restaurant_____, Bakery_____, Delicatessen_____, Grocery_____, Catering_____
Nursing home_____, Daycare_____, Mobile_____, Other_____

*Will establishment be seasonal? Yes No

If yes, what months will it be closed? _____

Number of Seats: _____

Number of Staff: _____
(Maximum per shift)

Total Square Feet of Facility: _____

Number of Floors on which
operations are conducted _____

Maximum Meals to be Served (approximate):

Breakfast _____

Lunch _____

Dinner _____

HOURS OF OPERATION

Monday: _____ a.m./p.m. - _____ a.m./p.m.
Tuesday: _____ a.m./p.m. - _____ a.m./p.m.
Wednesday: _____ a.m./p.m. - _____ a.m./p.m.
Thursday: _____ a.m./p.m. - _____ a.m./p.m.
Friday: _____ a.m./p.m. - _____ a.m./p.m.
Saturday: _____ a.m./p.m. - _____ a.m./p.m.
Sunday: _____ a.m./p.m. - _____ a.m./p.m.

*Please write "closed" on the first line of any day that the establishment is closed

FOOD SERVICE

Please answer the following question -

1. What type of service will you be providing? (circle all that apply)
 - a. sit down meals
 - b. take out
 - c. delivery
 - d. catering
 - e. mobile vendor

SERVING POTENTIALLY HAZARDOUS FOODS (PHF's)

Please check the categories of PHF's to be handled, prepared, and served.

- Thin meats (hamburgers, fillets, and other sliced meats)
- Thick meats (roast beef, whole poultry, ham)
- Cold processed foods (salads, deli sandwiches, vegetables, fruit)
- Hot processed foods (soups, rice/noodles, gravy, casseroles)
- Bakery goods (pies, custards, cream fillings)

THAWING POTENTIALLY HAZARDOUS FOODS (PHF's)

Please check the method(s) that will be used to thaw PHF's.

- Refrigeration (41°F or less)
- Running water (less than 70°F)
- Microwave (as part of cooking process)
- Cooked from frozen state

COOKING POTENTIALLY HAZARDOUS FOODS (PHF's)

Please answer the following questions -

1. Will thermometers be used to measure the final cooking/reheating temperatures of PHF's? Yes No
2. What types of thermometers will be used? (check all that apply)
 - dial
 - digital
 - laser
 - thermocouple

HOT AND COLD HOLDING OF POTENTIALLY HAZARDOUS FOODS (PHF's)

Please answer the following questions –

1. How long will cold PHF's be maintained at 41°F or below during holding? _____ N/A
2. What types of cold holding units will be used? (refrigerators, salad bar, etc..)

3. How long will hot PHF's be maintained at 140°F or above during holding? _____ N/A
4. What types of hot holding units will be used? (steam table, stove, oven, heated display unit, etc...)

5. How often will temperatures be taken of hot/cold PHF's during holding? _____

COOLING OF POTENTIALLY HAZARDOUS FOODS (PHF's)

Please check the method(s) that will be used to cool PHF's –

- shallow pans/bowls in refrigerator/freezer
- ice bath with continuous stirring
- rapid chill

1. Will soup, gravy, large cuts of meat, etc...be broken down into smaller portions for cooling? Yes No

FOOD AND DRINK SUPPLIES

Please answer the following questions -

1. Are all food and drink supplies from an inspected and approved source? Yes No
2. Please list all food and drink supply sources. (i.e. name of wholesale distributor, Walmart, etc...)

3. How often will food and drink supplies be delivered? (i.e. weekly, twice weekly, etc...)

N/A

COLD STORAGE

Please answer the following questions -

1. Is adequate refrigeration space available to keep refrigerated foods at 41°F or below? Yes No
2. Is adequate freezer space available to keep frozen foods frozen? Yes No N/A
3. Does each refrigerator and/or freezer have a thermometer? Yes No
(Thermometers must be located in an easy-to-read locations)

SANITIZATION PROCEDURES

Please answer the following questions -

1. What type of sanitation method will be used in the 3-compartment sink?
 - a. chlorine bleach
 - b. quaternary
 - c. iodine
 - d. hot water (170°F)
2. Will a dishwasher be used? Yes No
3. If yes, what type of sanitation method will be used in the dishwasher?
 - a. chlorine bleach
 - b. quaternary
 - c. iodine
 - d. hot water (180°F)
4. What type of sanitation method will be used to sanitize counter tops and other surfaces?
 - a. chlorine bleach
 - b. quaternary
 - c. iodine
5. How will countertops and other surfaces be sanitized?
 - a. sanitizer bucket with cloth towel
 - b. sanitizer spray bottle with paper towels
 - c. both
6. Are test kits available for each type of sanitizer? Yes/No

*Chlorine bleach must be non-scented. Lemon, floral, and other scents are not approved for sanitation.

SINKS

Please answer the following questions –

1. Is there a hand sink in each food/drink preparation area (including bar area)? Yes No N/A
2. Is there a hand sink in all ware washing areas? Yes No N/A
3. Is hot and cold water provided at all sinks? Yes No
4. Do all hand sinks have a mixing valve or combination faucet? Yes No
5. If metering faucets are present, do they provide a flow of water for at least 15 seconds? Yes No N/A
** This type of faucet is not recommended.*
6. Is dispensable hand soap available at all hand sinks? Yes No
7. Does each hand sink have a hand drying device? Yes No
(paper towel dispenser, warm air blower, or sanitary towel roll are approved devices)
8. Is a 3-compartment sink available for washing, rinsing, and sanitizing glasses, utensils? Yes No
9. Does the 3-compartment sink have drain boards on each side? Yes No
10. Does the 3-compartment sink have a grease trap? Yes No
11. Is a mop sink available for waste water disposal? Yes No

INSECT AND PEST CONTROL

Please answer the following questions –

1. Are all outside doors self-closing? Yes No
2. Are screen doors provided on all entrances where solid doors may be left open to the outside?
 Yes No N/A
3. Do all openable windows have mesh screening? Yes No N/A
4. Is the area around the building clear of unnecessary brush, litter, boxes, and other items that may promote insect/rodent harborage? Yes No

TOXIC ITEMS

Please answer the following questions –

1. Are all containers of toxic items clearly labeled with name of contents? Yes No
2. Are toxic items stored physically separate from or below food/drink items? Yes No
(toxic item examples – cleaners, sanitizers, insecticides, first-aid supplies, lotion)
3. Are insecticides/rodenticides stored separately from cleaners, sanitizers, etc...? Yes No N/A

WATER SUPPLY

Please answer the following questions –

1. Is the water supply public? Yes No
2. If no, the private well will be required to be inspected and sampled.
(Depending on the number of people served and how often, the well may be considered a non-community water source which would require inspections and water samples on a regular basis)
3. Will ice be made on premises? Yes No N/A
4. If yes, how often will ice machine be cleaned and sanitized? _____
5. If no, where will it be purchased? _____

BOIL ORDER GUIDELINES

Please answer the following questions –

1. In case of a boil order, is your facility supplied with extra bottled water? Yes No

2. How will your facility construct hand washing stations in the event of a boil order?

(Handwashing stations are required in food/drink prep, ware-washing, wait staff, and restroom areas)

3. How will your facility make sanitizer solution in the event of a boil order?

3. During a boil order, will all equipment connected to water lines be shut off? Yes No
(this includes soda machines, ice machines, industrial coffee machines, dish washers, and dipper wells)

4. Will employees be instructed to boil water for at least 1 minute for all cooking and cleaning purposes?
 Yes No

5. After a boil order, will all water lines be purged of standing water? Ice and beverage filters changed? All sinks sanitized? Yes No

*Please note: If your facility is ever without water, it must be closed until safe water is provided.

SEWAGE DISPOSAL

Please answer the following questions –

1. Is the building connected to a municipal sewer? Yes No

2. If no, the private septic system is required to be inspected by a licensed sewage contractor.

FLOORS, WALL, AND CEILING MATERIALS

Please complete the chart below (i.e. tile, concrete, wood, etc.. or N/A)

	Floor	Walls	Ceiling
Kitchen			
Ware washing area			
Wait staff area			
Walk-in coolers/freezers			
Bar area			
Retail area			
Seating area			
Restrooms			
Storage room(s)			
Basement			

*Carpet is not an approved surface.

*All wood surfaces should be painted and/or sealed.

1. Will food and/or beverage items be stored in a basement? Yes No N/A
2. If yes, are the floors, walls, and ceilings finished? Yes No N/A
3. If yes, is there adequate space so food, utensils, and equipment are not stored under plumbing? Yes No

TOILET FACILITIES

Please answer the following questions –

1. Are all toilet room doors self-closing? Yes No
2. Are all toilet rooms equipped with mechanical ventilation? Yes No
3. Are covered waste receptacles available in each stall in the women's restroom? Yes No

PLUMBING

All plumbing in the facility shall be sized, installed, and maintained in accordance with applicable provisions of the Illinois State Plumbing Code. Please consult with a licensed plumber to ensure your plumbing is up to code.

You may also contact the State Plumbing Inspectors with any questions –

Bureau County – Mike Hill 1-815-712-3265

Putnam County – Jay Lakowski 1-309-693-5379

OTHER

Please answer the following questions –

1. Are all food and drink supplies stored at least 6 inches off the floor? Yes No
2. Are all areas of the facility adequately lighted for proper cleaning and safety purposes? Yes No
3. Are all light fixtures shielded or equipped with shatter-proof bulbs? Yes No
(required in food preparation, food display, food service, storage, and ware washing areas)
4. Are all wood surfaces painted and/or sealed? Yes No N/A
5. Are all wall and floor junctures sealed with coving? Yes No
6. Will salad and/or buffet bars be equipped with sneeze guards? Yes No N/A
7. Will all cooking equipment be installed under hoods with mechanical exhaust? Yes No N/A

*Contact the local Fire Marshall for specific requirements.

CLEANING SCHEDULE

Please answer the following questions –

1. Will your facility have a cleaning schedule? Yes No
2. How will your facility be cleaned?
 - a. staff
 - b. cleaning service
 - c. both

Please mark how often the following items will be cleaned –

ITEM	CLEANING FREQUENCY (daily, weekly, monthly, N/A)
Floors	
Walls	
Ceilings	
Restrooms	
Refrigerators/Freezers	
Cabinet shelves/drawers	
Large equipment (fryer, oven, grills, etc...)	

GARBAGE

Please answer the following questions –

1. Do all garbage receptacles inside the facility have lids? Yes No
2. Will an outside dumpster be used? Yes No

If yes, please answer the following –

Number of dumpsters _____

Frequency of pickup _____

Contractor _____

3. Will the dumpster be stored on concrete/asphalt? Yes No N/A
4. Will an outside grease dumpster be used? Yes No

If yes, please answer the following –

Number of dumpsters _____

Frequency of pickup _____

Contractor _____

5. Will the grease dumpster be stored on concrete/asphalt? Yes No N/A

PERSONAL BELONGINGS

Please answer the following questions –

1. Will a dressing room be provided where employee belongings can be stored? Yes No

2. If no, where will employees store their personal belongings? (coat, purse, etc...)

3. Will there be a designated area for employee breaks? Yes No N/A

4. Will employees be instructed to store their drinks, food, etc...in a designated area away from consumer food and/or drinks to prevent possible contamination? Yes No N/A

5. Where will this designated area be located? _____

Illinois State Food Service Sanitation Code

Subpart A: General Provisions

Section 750.10 Definitions

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“Category I facility” means a food establishment that presents a high relative risk of causing foodborne illness based on the large number of food handling operations typically implicated in foodborne outbreaks and/or the type of population served by the facility. *A certified food service sanitation manager must be present in Category I facilities at all times when potentially hazardous foods are prepared and handled.* Category I facilities include those where the following operations occur:

- cooling of potentially hazardous foods
- potentially hazardous foods are held hot and/or cold for more than 12 hours
- reheating cooked and cooled potentially hazardous foods
- preparing potentially hazardous foods for off-premises serving
- preparing complex foods, handling raw ingredients extensively, and/or having hand contact with ready-to-eat foods
- performing vacuum packaging and/or other forms of reduced-oxygen packaging
- serving a population comprised mostly of immuno-compromised individuals such as

the elderly, children under the age of 4, and pregnant women

“Category II facility” means a food establishment that presents a medium relative risk of causing foodborne illness based upon few or no food handling operations typically implicated in foodborne illness outbreaks. *Category II facilities must employ a full-time certified food service sanitation manager at all times.* Category II facilities include those where the following operations occur:

- hot and/or cold foods are held for no more than 12 hours and are restricted to same day service
- minimal assembly of food containing raw ingredients
- foods requiring complex foods are obtained from an approved food processing plant, licensed high risk food service establishment, or retail food stores

STATEMENT: I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior permission from this Health Department may nullify final approval and/or cause delay in approval.

Signature(s) _____

(owner(s) or responsible representative(s))

Date: _____

Approval of these plans and specifications by this Health Department does not indicate compliance with any other code, law or regulation that may be required--federal, state, or local. It further does not constitute endorsement or acceptance of the completed establishment (structure or equipment). A pre-opening inspection of the establishment with equipment in place and operational will be necessary to determine if it complies with the local and state laws governing food service establishments.

