

The intent of this form is to assist in determining the acceptability of the proposed plans for official review and is NOT a substitute for a full and detailed review by a Plan Check Specialist.

Plans accepted for plan check review. SR Plans not accepted. Please resubmit three (3) new, complete sets. Provide this form with your next submittal.

Facility Name

Address

Contact Name and Phone Number Preferred Method to Receive Letters 🗌 Mail 🗌 Fax 🗌 Email Date _____

Unpackaged Food Facility Criteria:

Y	Ν	N/A	Criteria
			Three identical sets of plans
			Floor plan drawn to scale, readable, and in ink
			Previous floor plan (remodels only)
			All equipment drawn on floor plan
			Equipment schedule with make and model numbers of all equipment
			Complete finish schedule for all areas
			Menu (For new construction and large remodels only)
			Storage – 32 linear feet of 3-tier ANSI certified shelving units. Based on
			size and type of operation, additional shelving may be required.
			Change room or lockers
			Detailed exhaust hood drawings, including elevations and CFMs
			3-Compartment sink with dual integral drainboards and floor sink
			Handwash sink
			Prep sink with floor sink (For new construction and when applicable)
			Mop sink
			Water heater location and proposed energy input
			Employee restroom(s)
			Public restroom(s)

Packaged Food Facility Criteria:

Y	Ν	N/A	Criteria
			Three identical sets of plans.
			Floor plan drawn to scale, readable, and in ink
			Previous floor plan (remodels only)
			All equipment drawn on floor plan
			Equipment schedule with make and model numbers of all equipment
			Finish schedule
			Storage – 16 linear feet of 3-tier shelving units
			Mop sink
			Water heater location and proposed energy input
			Employee restroom(s)

Comments:

Preliminary checker