

CONNEAUT CITY HEALTH DEPARTMENT

FSO/RFE PLAN REVIEW APPLICATION

All new or extensively remodeled food service operations (FSO) and retail food establishments (RFE) are required to submit prepared plans with specifications to the local board of health for approval before license can be issued and food can be prepared and served.

The following application must be filled out in its entirety and the appropriate fee **(\$75.00)** submitted before plans will be accepted for review. When such plans are accepted by the board of health, they shall be acted upon within thirty (30) days of receipt.

Submittal of Plans (application should be submitted at least 30 days prior to construction)

- Complete the attached Plan Review Application
- Submit one (1) complete set of drawings and other applicable information for the facility
- Submit menu or complete list of food and beverage items to be sold
- Submit the plan review fee made payable to the Conneaut City Health Department

Plan Review Process

- Written approval, disapproval, or a request for additional information will occur within 30 days of receipt of the application and plan review fee

Construction

- Ensure that all contractors and subcontractors are properly licensed
- Ensure that your contractor obtain all the necessary permits through the County Building Department, Plumbing Department, and Conneaut Housing and Zoning Department
- Contact your local Fire Department for inspection of your facility

Inspection

- Prior to opening your establishment, you must have a pre-licensing inspection by Conneaut City Health Department
- The license will not be issued until the facility meets all of the applicable code requirements at the time of the pre-licensing inspection

Content and Format Requirements for Submittal

The facility layout and equipment specifications submitted for review must meet all of the requirements of Chapter 3717-1-09 of the Ohio Administrative Code. The submittal must include the following components:

1. The type of operation or establishment proposed and a complete list of food items to be prepared, served, or sold (menu).
2. A facility floor plan illustrating the layout of fixtures and other equipment. These specifications must be legible and be drawn reasonably to scale.
3. The total square footage to be used by the food service operation or retail food establishment for food preparation and serving.
4. A detailed drawing of the portions of the premises being used including all entrances/exits, loading/ unloading areas, docks, etc.



5. A site plan of your property that includes the following:
 - a. Drawing showing an arrow indicating north
 - b. Location of building site, including alleys, streets, and location of any outside support infrastructure such as dumpsters
 - c. Interior and exterior seating areas
6. A plumbing plan including the location, number, and types of plumbing fixtures; include all water supply facilities.
7. A lighting plan, both natural and artificial, with the number of foot-candles indicated for critical surfaces.
8. A complete list of building materials and surface finishes to be used for each room including the floors, walls, ceilings and coved wall/ juncture bases. Note: ceiling tiles installed in food preparation areas and ware washing areas must be vinyl-clad or coated.
9. A list of all equipment with the manufacturer name and model numbers listed. Only commercial equipment approved by a recognized food equipment testing agency, as acceptable for use in a food service operation or retail food establishment, will be accepted as specified under rule 3717-1-04.1(kk) of the Ohio Administrative Code.
10. Label and locate all dedicated hand sinks and dump sinks. Where applicable, dump sinks may be required (i.e. behind bars, front portions of convenience stores, etc.) that are separate from designated hand sinks.

Education Requirements

As of March 1, 2010, the Ohio Revised Code requires that all food service operations and retail food establishments opened after this date have at least one person-in-charge per shift that has a minimum of **LEVEL ONE** certification in food protection or an equivalent approved training within 90 days of being licensed.

As of March 1, 2017, each risk level 3 and risk level 4 food service operations and retail food establishment **must have at least one management or supervisory employee with a level two certification in food protection.** This certification is obtained through the Ohio Department of Health after completing an approved course (15 hours of instruction and passing a comprehensive exam). A ServSafe® certificate itself and the level one certificate does not comply with this rule.

If you have any questions throughout this application, please call the Conneaut City Health Department at 440-593-3087.



AGENCY CONTACT INFORMATION

Contact the following agencies, even if you are purchasing an existing facility. Each of the following agencies will have specific requirements that vary from the requirements of the Conneaut City Health Department.

You may need to contact other agencies to ensure that all appropriate steps are taken and that the necessary permits are received. Contacting the agencies in advance will help you stay on track and on time. Contact these agencies, even if you are purchasing an existing facility. All necessary permits must be obtained before the Health Department can issue a food license.

Office	Service	Phone Number	Website
Conneaut City Health Department	Facility layout & equipment review/food license, private water system	440-593-3087	http://conneautohio.gov/departments/health_department/
Ashtabula County Building Department	Plan Review, Building Code Compliance, Certificate of Occupancy, ADA and Restrooms	440-576-3737	http://www.ashtabulacounty.us/181/Building
Ashtabula County Health Department-Plumbing Inspector	Commercial Plumbing Inspections	440-576-6010	Ashtabulacountyhealth.com
Conneaut Fire Department	Fire Safety, Ventilation Hoods and Extinguishing System	440-593-7460	http://conneautohio.gov/departments/public-safety/fire/index.php



Conneaut City Health Department: Plan Review Application

Facility Information:

Name of Facility: _____

Address: _____

City: Conneaut State: Ohio Zip: 44030

Seating Capacity: _____ Total Size of Operation (sq. ft.): _____

Applicant/Operator Information:

Name of Licensee (Owner): _____ Phone: _____

Email Address to send inspection reports: _____

Mailing Address for License Renewal: _____

City: _____ State: _____ Zip: _____

Plan Review Type:

- New construction or facility has never operated as a food facility
- Remodel or extensive alternation of an existing licensed food facility

Type of Establishment: Food Service Operation (FSO) Retail Food Establishment (RFE)

Risk Level: Level 1 Level 2 Level 3 Level 4

Types of Food Service or Retail Establishments (*check all that apply*)

- Table Service Fast Food School/Daycare Catering Buffet Drive Thru/In
- Bar w/ Food Convenience Store Grocery Store Assisted Living Facility Gas Station
- Seafood/Fish Mirco Market Carry-out restaurant Bakery
- Other _____ Other _____

Anticipated Construction Date: _____

Anticipated Opening Date: _____

OFFICE USE ONLY:

Amount Received: _____ Date: _____

- Check # _____ Cash M/O
- New Remodel Level 1 2 3 4

Received By: _____



Plan Review Checklist

The following information must be included as part of your plan review.

Please indicate that the following components are included (X) or not applicable (N/A)

Components	(X) or (N/A)	Official Use Only
Plan Review Fee made payable to Conneaut City Health Department		
List of Food Suppliers		
Facility floor plan or layout , drawn reasonably to scale (to include):		
<ul style="list-style-type: none"> Total square footage to be used 		
<ul style="list-style-type: none"> Location of entrances and exits 		
<ul style="list-style-type: none"> Location of personal belongings storage 		
<ul style="list-style-type: none"> Location of designated hand sinks 		
<ul style="list-style-type: none"> Location of mop sink 		
<ul style="list-style-type: none"> Restroom location 		
<ul style="list-style-type: none"> Location of three compartment sink 		
<ul style="list-style-type: none"> Location of dish machine (high or low temp) 		
<ul style="list-style-type: none"> Location of all equipment 		
Site Plan (to include):		
<ul style="list-style-type: none"> Interior and exterior seating areas 		
<ul style="list-style-type: none"> Location of building site, including alleys, streets, and location of any outside support infrastructure such as dumpsters 		
<ul style="list-style-type: none"> Drawing showing an arrow indicating north 		
Lighting Plan		
Equipment List		
Interior finish (Floors, ceiling, walls, covering (washable))		
Plumbing Plan		
Menu of proposed foods		
Education: please provide a copy (ServSafe)		

REMINDER: plans that are missing any of the above information will be considered incomplete and the approval process will be delayed. After 30 days, incomplete plan may not be approved. A new application, fee and re-submittal of plans will then be required.

Food Protection

1. Do you have a written sick policy that ensures your food employees are informed of their responsibilities to report to the PIC information about their health as it related to diseases that are transmissible through food? Yes No
2. Do you have a written procedure for employees to follow when responding to vomiting or diarrheal events that address how to minimize the spread of contamination and the exposure to employees, consumers, and surfaces? Yes No
3. Will each refrigerator, freezer or warmer have a temperature measuring device? Yes No
4. Will you be processing produce for ready to eat sale (i.e. wash and cut fruits and vegetables) Yes No
5. Will you be cooling foods (this means saving leftovers to reheat at a later date)? If YES, you MUST cool them properly to prevent bacterial growth. Improper cooling is the most common cause of foodborne illness outbreaks in the U.S. The Ohio food code requires that TCS food shall be cooled within 2 hours from 135 to 70 AND from 70 to 41 within an additional 4 hours or less. The entire process must be accomplished within a total of 6 hours. *Check one or more of the approved methods that will be utilized.*
 - Placing the food in shallow pans Food will be separated into smaller portions
 - Adding ice as an ingredient Rapid cooling equipment
 - Stirring the food in a container placed in an ice water bath Using containers that facilitate heat transfer
6. Which method will be used to prevent hand contact with ready-to-eat foods? As of March 1, 2019, the use of latex gloves is prohibited. *Check all that apply.*
 - Not applicable non-latex disposable gloves Tongs Deli tissue, wax paper
7. Dishes must be air dried. Where will you be placing clean dishes to properly air dry?
 - Sink drain boards Dishwashing racks Wire racks/shelves
8. What type of sanitizer will be used for equipment and utensils? *Check all that apply.*
 - Chlorine (bleach) Quaternary Ammonia Hot water (automatic dishwashers only)



I am submitting a complete plan review packet, all required information and the appropriate fee as determined above is included. I understand that incomplete plans may delay the opening of my facility.

Applicant Signature: _____ **Date:** _____

Submit plan with this application and appropriate fee to:

Conneaut City Health Department
327 Mill Street
Conneaut, Ohio 44030