Environmental Health

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FOOD SERVICE ESTABLISHMENT PLAN REVIEW APPLICATION

The following documents are necessary and must be included in order to complete the plan review. Lack of complete information may delay review and plan approval. Allow 2 weeks for initial plan review response. Fees are $100.00 upon submittal and $480.00 following the plan review and pre-opening inspection.

Please complete the following information:		
SITE ADDRESS		
Facility Name		
Facility Address		
City	State	Zip Code
Telephone Number	Fax Number	
Email Address		
FEIN # or Tax Exempt #	Colorado State Sales Tax #	

Please complete if the mailing address is different from the facility above:		
SITE MAILING ADDRESS		
Local Mailing Address		
Local Mailing City	State	Zip Code
Telephone Number	Fax Number	

Owner Mailing Address: *This is where your license renewal will be sent.*		
Legal Owner's Name		Date Acquired
Owner's Mailing Address		
City	State	Zip Code
Owner's Telephone #	Owner's Fax Number	
Cell Phone #	Email Address	

Please complete the following information if available:		
Local Contact Person's Name	Contact #	Email Address
Contractor/Builder Name	Contractor Phone #	

DATE CONSTRUCTION WILL BEGIN:_____ PLANNED DATE OF OPENING:_____

Type of Operation: Sit Down Meals: __ Take Out: __ Catering: __
Grocery: __ Other: __
If Other Please Specify: _____

Total Square Feet of Establishment: _____

Total Square Feet of Kitchen Area: _____

Total Retail Area Dedicated to Food (for Retail Markets): _____

Months of Operation:	Jan	Feb	Mar	Apr	May	Jun
Circle Months in Operation	Jul	Aug	Sep	Oct	Nov	Dec

Days and Hours of Operation:	Mon	Tue	Wed	Thu	Fri	Sat	Sun
	_____	_____	_____	_____	_____	_____	_____

Maximum Number of Meals Served:	Breakfast	Lunch	Dinner
	_____	_____	_____

Seating Capacity: Inside: _____ Outside: _____ Bar: _____ Total: _____

Number of staff: _____ Maximum staff per shift: _____

For a copy of regulations pertaining to retail food establishments go to
http://www.cde.state.co.us/cdenutritran/download/pdf/RetailFoodEstablishment.pdf

Please submit the following with this application packet. Incomplete applications will not be accepted.

___ A proposed menu.

___ Facility floor plan, drawn to scale, including all equipment and plumbing fixtures, storage areas, electrical panels, chemical storage, and any other areas important to operation.

___ A site plan showing the location of the business in the building, location of the building on site including alleys, streets, and the location of any outside facilities (i.e. dumpsters, walk-in units, grease interceptors).

___ Specification sheets for all equipment, including make and model numbers.

___ A finish schedule stating how walls, floors and ceiling will be made as to be smooth and easily cleanable and use appropriate materials.

___ Water heater specifications, including make and model numbers.

___ Water supply and wastewater system information if on an Onsite Wastewater Treatment System (OWTS) or private well.

FOOD HANDLING PROCEDURES:

1. Is there a Hazard Analysis Critical Control Plan (HACCP) Plan/Food Handling Procedure Manual that describes preparation, cooling, reheating, and cooking of foods and the handing of leftovers? (If yes, please submit with plans) Yes ___ No___

2. List the foods that will be prepared more than 12 hours in advance of service.

3. Describe the methods of how hot foods will be cooled to 41 degrees or less.

Food	Cooling Method

4. Describe how foods will be rapidly reheated to 165 degrees or more.

Food	Reheating Method

5. Indicate how hot foods will be held at 135 degrees or more.

Food	Hot Holding Method

6. How will frozen foods be thawed?

7. How will raw meats, poultry, and seafood be stored/displayed to protect cooked and ready to eat foods?

8. Indicate the number of refrigeration and freezer units:

TYPE OF UNIT	# Of Units	Total Cubic Feet
Walk-in Refrigerator		
Reach-in Refrigerator		
Walk-in Freezer		
Reach-in Freezer		
Blast Chiller		
Retail Display		

9. Will catering or deliveries be conducted? Yes___ No___

If yes, describe how foods will be transported and held at service sites to maintain proper temperatures and prevent contamination, how hand washing will be conducted at service sites, and list of equipment to be used for these activities.

10. How and where will produce be washed in the establishment?

11. Will vacuum packaging be conducted in the establishment? Yes ___ No ___

If yes, please provide the required HACCP Plan for each category of food to be vacuum packaged.

12. Will bulk food items be used? Yes ___ No ___

If Yes, please include bulk food bins or storage method with the equipment specifications.

13. Provide a list of the type of food shields and sneeze guards and their location. If custom design, please submit shop drawings.

14. How will staff members limit bare hand contact with ready to eat foods?

FACILITY:

1. What type of sanitizer will be used for the cleaning of surfaces in the establishment?

_____

_____

2. Please list the backflow prevention device used for each piece of equipment, as required:

Equipment Type	Backflow Prevention Type
Dish Machine	
Walk In Refrigerator/Freezer	
Food Prep Sink	
Ice Machine	
Mop Sink	
Other _____	

3. Please provide the size of the compartments and location of each sink.

Sink Location _____
Compartment 1 Length _____ Width _____ Depth _____
Compartment 2 Length _____ Width _____ Depth _____
Compartment 3 Length _____ Width _____ Depth _____

Sink Location _____
Compartment 1 Length _____ Width _____ Depth _____
Compartment 2 Length _____ Width _____ Depth _____
Compartment 3 Length _____ Width _____ Depth _____

Sink Location _____
Compartment 1 Length _____ Width _____ Depth _____
Compartment 2 Length _____ Width _____ Depth _____
Compartment 3 Length _____ Width _____ Depth _____

4. Please list the clean and soiled drainboard sizes for each of the previously listed sinks:

Sink Location _____
Soiled Drainboard Length _____ Width _____
Clean Drainboard Length _____ Width _____

Sink Location _____
Soiled Drainboard Length _____ Width _____
Clean Drainboard Length _____ Width _____

Sink Location _____
Soiled Drainboard Length _____ Width _____
Clean Drainboard Length _____ Width _____

5. Are the drain boards large enough to accommodate all soiled and cleaned items?

Yes ____ No___

6. Please list the location and sanitizer type for each dish machine.

Dish Machine Location _____ Sanitizer _____

Dish Machine Location _____ Sanitizer _____

Dish Machine Location _____ Sanitizer _____

7. List the location of sinks with pre-rinse/spray hoses or soak sinks.

_____

_____

8. How will lighting be protected to prevent the shatter of light bulbs in areas where exposed food, clean equipment, and other food items are located?

_____

_____

9. Where will chemicals be stored on the premises?

_____

_____

10. How will outside entryways and windows be protected to prevent pest entry?

_____

_____

11. Food grade thermometers, refrigeration thermometers, and testing equipment for sanitizer concentration are required. Please list equipment:

_____

_____

_____

12. Will linens be laundered on site? Yes___ No___

If yes, please describe the location of the washing machine and how dirty and clean linens will be stored.

_____

_____

_____

_____

Along with equipment specification sheets, please complete this form stating how each piece of equipment will be installed to insure cleanability.

Equipment Installation List					Installation Method						
					At Floor		At Wall		Adjacent Equipment		
Equipment	Location	ID# or code on plans	New (N) or Used (U)	Plumbing Required (Y or N)	Masonry Island	Approved Legs	Casters	Attached	Separation (Inches)	Attached	Portable

APPENDIX D

WORKSHEET FOR CALCULATING MIMIMUM HOT WATER REQUIREMENTS

The following worksheet is provided to assist operators in calculating hot water usage and sizing of the water heater required for the operation.

CALCULATE WATER REQUIRED BY ALL FIXTURES:

A. Three compartment sink calculation of water usage:

1. Measure dimensions of each compartment, if compartments are not the same dimensions, see note below.

Length=_____ Width= _____ Depth= _____

2. Insert measurements into equation

(_____ x _____ x _____ x 3 x .375) ÷ 231 = _____
Length Width Depth Water Usage

Note: If all the compartment sizes of the sink are not the same, then 3 is taken out of the equation, and the above calculation is done for each compartment. The volumes are added to obtain the total gallons per hour of hot water used in the sink.

Enter number into attached Table to Calculate Total Water Required By All Fixtures.

B. Utensil soak sink

1. Measure dimensions of sink

Length = _____ Width = _____ Depth = _____

2. Insert measurements into equation

(_____ x _____ x _____ x .375) ÷ 231 = _____
Length Width Depth Water Usage

Enter number into attached Table to Calculate Total Water Required By All Fixtures.

C. Dishmachine and conveyor pre-rinse water usage:
Use manufacturer's rating in gallons per hour

Enter number into attached Table to Calculate Total Water Required By All Fixtures.

D. Clothes washer water usage:
Use manufacturer's rating, or 32 GPH for 9-12 pound washer, or 42 GPH for 16 pound washer.

Enter number into attached Table to Calculate Total Water Required By All Fixtures.

E. Go to the Table on the next page and enter water usage totals into the appropriate rows and columns.

TABLE TO CALCULATE TOTAL WATER REQUIRED BY ALL FIXTURES

Plumbing Fixture	Water Usage (gallons per hour)	Number of fixtures	Maximum hourly water usage per type of fixture (gallons per hour)
Example: dishmachine	*50*	*1*	*50*
Example: handsinks	*5*	*4*	*(5 x 4) = 20*
3-compartment sink			
3-compartment sink (bar)			
Utensils soak sink			
Dishmachine			
Dishmachine conveyor pre-rinse			
Clothes washer			
Hand operated pre-rinse sprayer	32		
Handsinks (including restrooms)	5		
Mop sink	7		
Garbage can washer	35		
Employee showers	14		
Hose bib used for cleaning	35		
Total water (gph) required by all fixtures			

A. Working across each row, use the gallon per hour (gph) rating for each type of fixture, and the number of fixtures in the operation, into the Table above to calculate "Maximum Hourly Usage" for each type of fixture. (see example at top of table)

B. Then, working down the right column, add up the "Maximum Hourly Usage" for each type of fixture to calculate "Total Water Required By All Fixtures" in the operation.

C. Take the "Total Water Required By All Fixtures" Total, and enter that number into the following equations for either a Gas Water Heater or Electric Water Heater to determine the rating of the water heater required.

CALCULATE THE WATER HEATER SIZING REQUIREMENTS:

A. GAS WATER HEATER:

1. To calculate the maximum hourly hot water usage for the facility, first adjust the total water required by all fixtures, for the altitude of the facility. The altitude adjustment is 4% per 1000 feet of elevation, or 20% at 5000 feet.

(.04 x _____ ÷ 1000) + 1 = _____
elevation of facility — adjustment factor

2. Using the adjustment factor from above, calculate the hourly hot water usage.

_____ x _____ = _____
adjustment factor — total water required by all fixtures — maximum hourly hot water usage

*For example, if the elevation of a facility is 5000 feet, the adjustment factor would be 1.2.
If the total water required by all fixtures (gph from the previous table), is 100 gph, then the maximum hourly hot water usage would be 120. Therefore, a water heater with 120 gph recovery rate would be required for the facility.

3. Use the "maximum hourly hot water usage" value in the previous equation to calculate the minimum BTU rating of the water heater using the calculation below.

Commercial water heaters only- Insert the decimal equivalent of the water heater thermal efficiency rating in the box below. (if unknown or a non-commercial water heater, use .75)

(_____ x 100 x 8.33) ÷ ☐ = _____
maximum hourly usage as calculated above — minimum BTU rating

B. ELECTRIC WATER HEATER:

1. If an electric water heater is to be used, the maximum hourly hot water usage for the operation is the same number as the total gph of water required by all fixtures as calculated in the Table in section 2.
Use this value in the equation to calculate the minimum Kilowatt rating of the water heater.

(_____ x 100 x 8.33) ÷ 3412 = _____
maximum hourly hot water usage (as totaled in the Table, section 2) — minimum Kilowatt rating

4. SELECT WATER HEATER BASED UPON BTU OR KILOWATT RATING:

Make:_____ **Model:**_____

BTU Rating: _____
or
Kilowatt Rating:_____

Recovery Rate:_____ **gallons per hour at 100° rise at sea level**

The BTU or Kilowatt rating for the water heater in the facility must be equal to or greater than the minimum BTU or Kilowatt rating calculated in sections 3-A or 3-B.