



Ashtabula County Health Department

12 West Jefferson Street
Jefferson, Ohio 44047-1096
(440) 576-6010

FOOD SERVICE / FOOD ESTABLISHMENT PLAN REVIEW NOTICE

All food service/food establishment plan review applicants are responsible for ensuring that their food service/food establishment operations will be connected to approved Ohio Environmental Protection Agency sewage disposal systems.

The Ashtabula County Health Department will not refund food service/food establishment plan review fee payments to applicants once food service/ food establishment plans have been approved by the Ashtabula County Health Department.

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Dear Prospective Food Service/Retail Food Establishment Operators:

The attached information will help guide you through the approval process in order to get your business opened on schedule.

In addition to the Ashtabula County Health Department you will also be working with the following other agencies. These agencies need to be contacted before any work is started.

1. **Ohio Environmental Protection Agency** **330-425-9171**
Commercial Sewage Disposal Approval required. The proposed food service operation must be served by sanitary sewers or by an OEPA approved sewage disposal system. An OEPA approved water supply must also be provided to obtain a food service/food establishment operation license.
2. **Ashtabula County Building Department** **576-3737**
They will need to be contacted concerning all building approvals. Contact them concerning plans submission, permits and inspection frequencies. The Building Department approval will also include fire safety approval.
3. **Ashtabula County Plumbing Department** **576-6010**
For permitting and inspections of the plumbing system in your operation.
4. **Local Zoning Department**
5. **Ashtabula County Auditor** **576-3783**
To obtain a vendors license.

To obtain plan approval from our department you need to submit the following items:

1. **Facility Layout and Equipment Specification Review**
A fee of \$75.00 payable to the Ashtabula County Health Department. When the plans are approved, a letter to that effect will be mailed to you.
2. **Sample Floor Plan(s)**
This will give you an idea on how to draw up the required floor plan.
3. **Plan Approval Criteria Sheet**

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4. Food Service Data Sheet

List the make and model numbers of all equipment to be used and provide a copy of the menu.

5. Inspection Approval Sheet

This sheet contains required approvals from the County Building Department, County Plumbing Department and the Fire Department.

When the various agencies approve their respective areas they need to sign and date this form. When completed, it needs to be returned to this department prior to obtaining your license. **NO LICENSE WILL BE ISSUED WITHOUT THIS COMPLETED FORM.**

6. Level One Certification in Food Protection

All new food service/food establishment operations must have each person in charge per shift take the Level One Certification in Food Protection Course before the Ashtabula County Health Department can issue a food service or food establishment license. You may contact the Ohio Department of Health Food Protection Program at (614) 466-1390 to obtain a list of approved Level One Certification Food Protection Trainers. One online course you can take to receive this certification can be found at:

<http://www.servsafe.com/catalog/ProductList.aspx?MS=SST&SCID=52&RCID=21>.

*****NOTE:** The Ashtabula County Health Department has obtained approval from the Ohio Department of Health to provide Level One Certification in Food Protection to new food service/food establishment operations. For more information contact the Ashtabula County Health Department at 576-6010.

Contact our office at least 72 hours (3 business days) before you wish to open, to schedule a pre-license inspection. This inspection insures that an operation is constructed according to the approved plans. Once the inspection is satisfactorily completed and all the required paper work received, you can obtain your license. Good Luck in your endeavor. Should you have further questions, contact a Sanitarian at the Ashtabula County Health Department at 440-576-6010 option 5 between 8 & 10 a.m. weekdays.

ONCE THE PLAN APPROVAL IS COMPLETED AND YOU HAVE OBTAINED LEVEL ONE CERTIFICATION IN FOOD PROTECTION TRAINING FOR THE PERSON IN CHARGE OF EACH SHIFT, YOU WILL BE ELIGIBLE TO OBTAIN A FOOD SERVICE/FOOD ESTABLISHMENT LICENSE.

****** PLAN APPROVAL OF FOOD SERVICE/FOOD ESTABLISHMENT OPERATIONS ARE VALID FOR 2 YEARS FROM DATE OF ISSUANCE.**

FSO/FE Review # _____
Fee Paid \$ _____
Date Paid _____
Receipt Number _____

The Ashtabula County Health Department
12 West Jefferson Street
Jefferson, Ohio 44047
(440) 576-6010 Option 3

**FOOD SERVICE/FOOD ESTABLISHMENT FACILITY LAYOUT
AND EQUIPMENT SPECIFICATION REVIEW**

****The Cost of this Plan Review is \$75.00****

OPERATION NAME _____

OPERATION ADDRESS _____

TELEPHONE NUMBER _____

OPERATOR/OWNER _____

ADDRESS _____

TELEPHONE NUMBER _____

Sanitarian _____

Date of Review _____

Approved _____ Disapproved _____

LEVEL 1 _____ 2 _____ 3 _____ 4 _____ FSO _____ RFE _____

COM _____ NONCOM _____ <25,000 _____ >25,000 _____

OEPA LIMITED MENU APPROVED: _____ YES _____ NO

LEVEL ONE CERTIFICATION IN FOOD PROTECTION _____ YES

NAME OF EMPLOYEE _____

COURSE NAME _____ CERTIFICATE NUMBER _____

**** PLAN APPROVAL OF FOOD SERVICE/FOOD ESTABLISHMENT OPERATIONS
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TO: Proposed Food Establishment and Food Service Operators

FROM: Ashtabula County Health Department

RE: Plan Approval Criteria

Please note that the plans for your Food Service Operation/Food Establishment must address all criteria listed below.

3717-1-09 Criteria for reviewing facility layout and equipment specifications.

(A) The facility layout and equipment specifications submitted for the approval of the licensor (Ashtabula County Health Department) shall clearly confirm that the applicable provisions of Chapter 3717-1 of the Administrative Code (Ohio Uniform Food Safety Code) can be met. The facility layout and specifications shall be legible, be drawn reasonably to scale, and shall include:

- (1) The type of operation or establishment proposed and foods to be prepared and served;
- (2) The total area to be used for the food service operation or retail food establishment including square footage;
- (3) All portions of the premises in which the food service operation or retail food establishment are to be conducted;
- (4) Entrances and exits;
- (5) Location, number and types of plumbing fixtures, including all water supply facilities;
- (6) Plan of lighting, both natural and artificial, with foot-candles indicated for critical surfaces;
- (7) A floor plan showing the general layout of fixtures and other equipment;
- (8) Building materials and surface finishes to be used; and
- (9) An equipment list with equipment manufacturers and model numbers.

Failure to submit food service/food establishment plans to address the previously mentioned criteria will result in the disapproval of the plans you submitted for your proposed food service/ food establishment.

Plan approval of food service/food establishment operations are valid for 2 years from date of issuance.

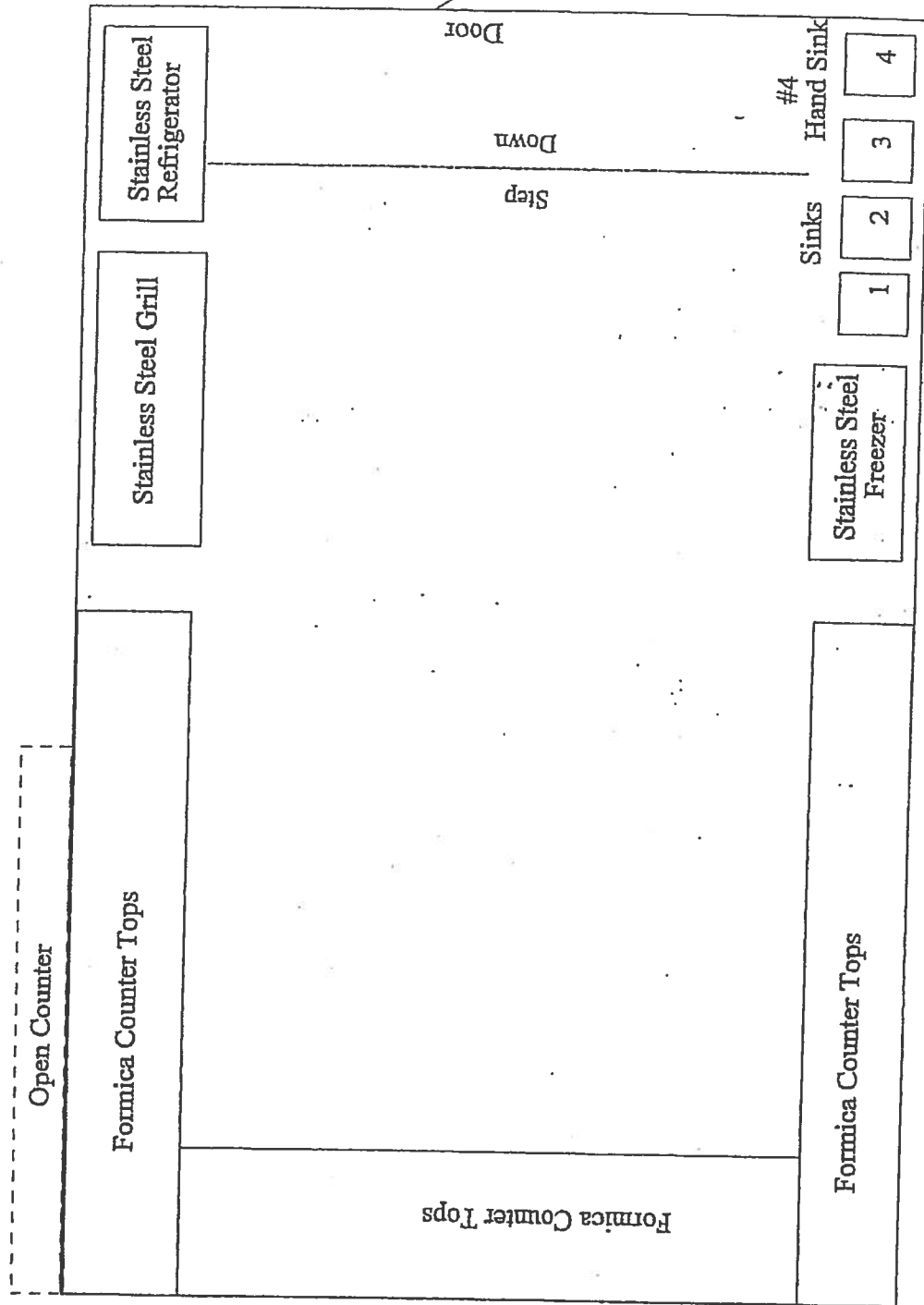
Should you have any further questions pertaining to this matter, please contact the Ashtabula County Health Department at (440) 576-6010 between 8 & 10 a.m. weekdays.

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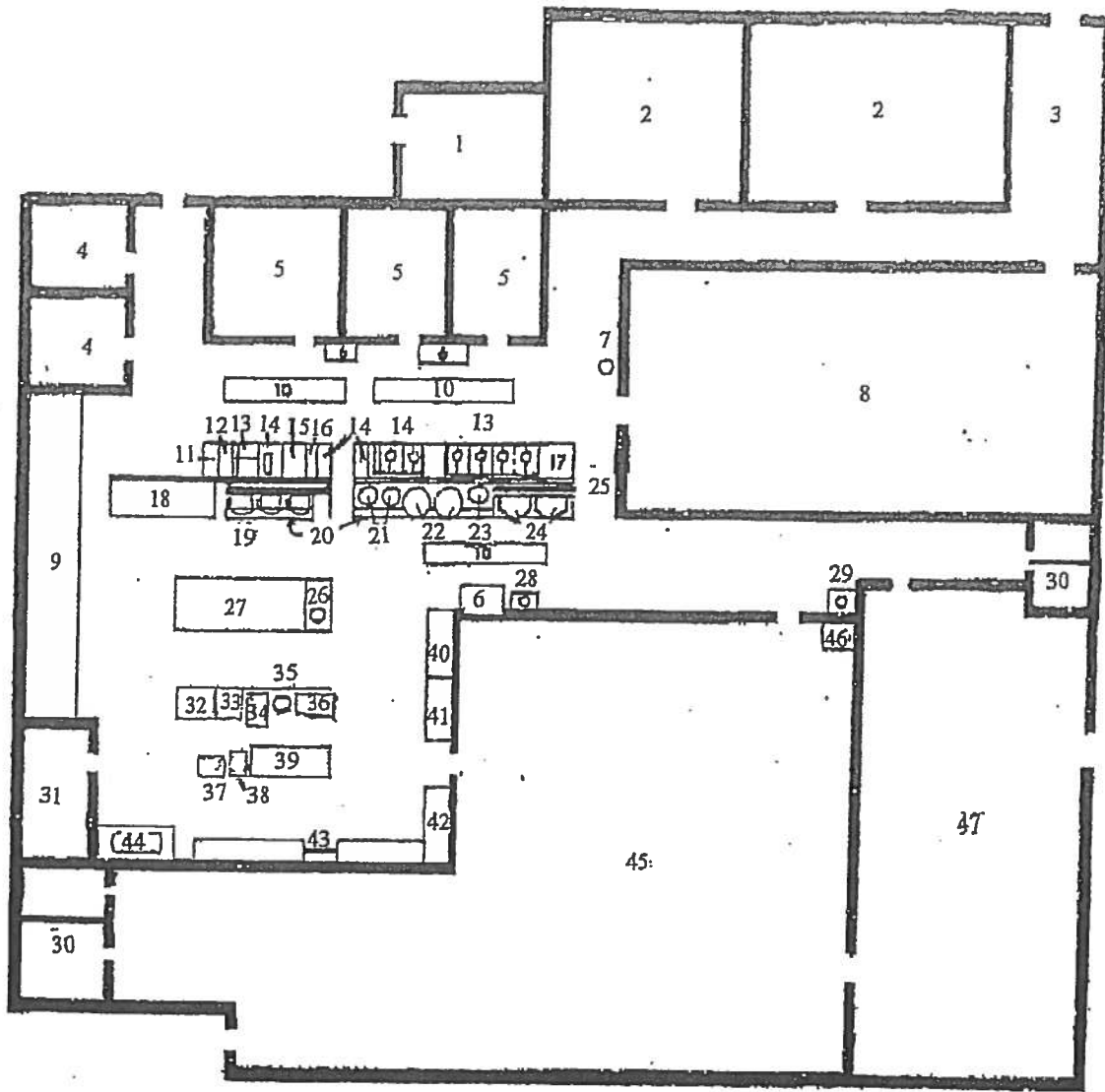
Menu
 Steak Salad
 Chicken Pop
 Fish Bread
 Hamburgers

**Example
 Food Service Operation
 Floor Plan**

Food Service Operation:
 Operator:
 Location:
 Township:
 Phone:



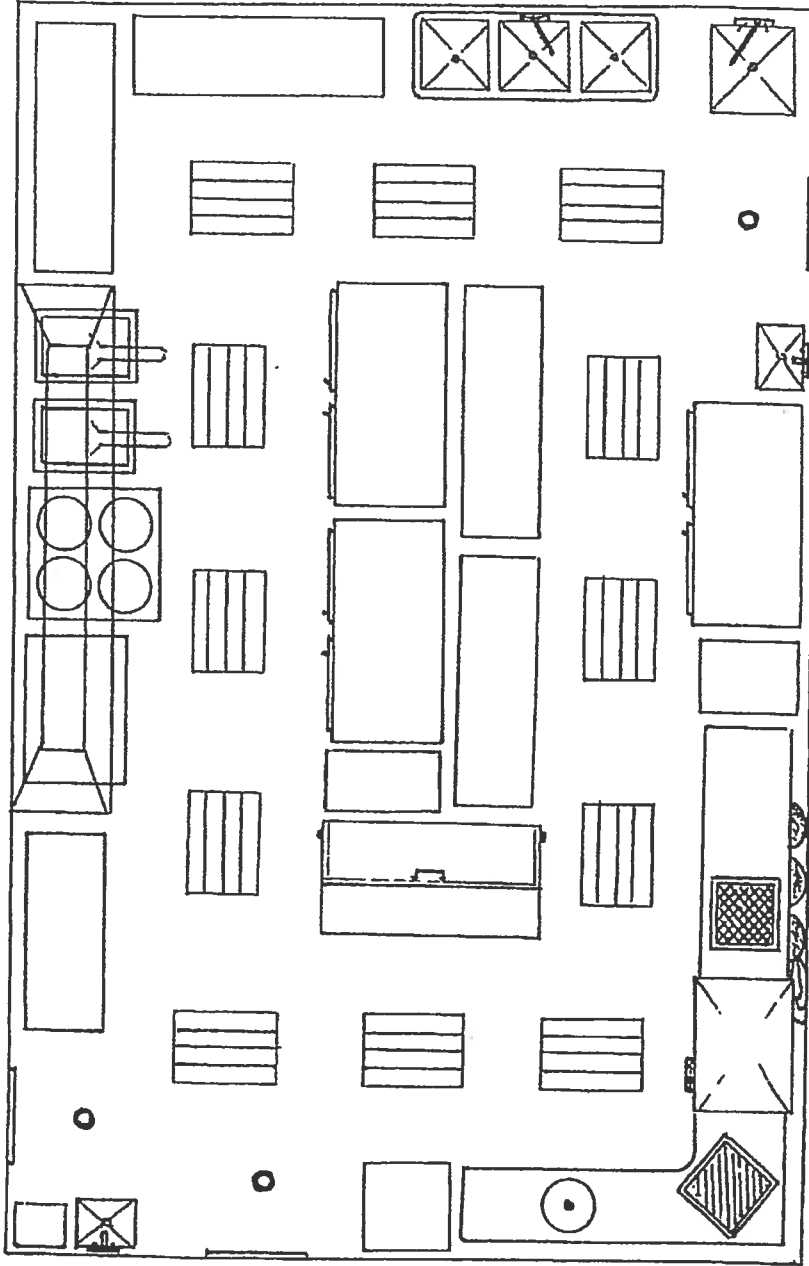
Example Floor Plan





- | | | |
|---------------------------------|---------------------------------|-------------------------------------|
| 1. Refuse Storage | 17. Char-glo Broiler | 33. Dough Mixer - 20 Qt. |
| 2. Walk-in Freezer | 18. Roast Oven | 34. Doug Mixer - 30 Qt. |
| 3. Receiving Area | 19. Vegetable Steamers | 35. Steam Jacketed Kettle - 30 Gal. |
| 4. Employee Lockers/Rest Rooms | 20. Exhaust Hoods | 36. Hot Plates |
| 5. Walk-in Refrigerator | 21. 60 Qt Steam Jacketed Kettle | 37. Cooling Rack |
| 6. Reach-in Refrigerator | 22. 80 Qt Steam Jacketed Kettle | 38. Convection Oven |
| 7. Potato Peeler | 23. Tilting Kettle | 39. Bake Ovens |
| 8. Dry Food Storage | 24. Tilting Skillets | 40. Ice Machine |
| 9. Clean Dish & Utensil Storage | 25. Kettle Filler | 41. Water Station |
| 10. Prep Tables | 26. Vegetable Sink | 42. Scrap and Pre-rinse |
| 11. Open Burner | 27. Salad/Sandwich Prep | 43. Dish Machine |
| 12. Range Grill Top | 28. Handwashing Sink | 44. Pot and Pan Sinks |
| 13. Salamander Broiler | 29. Utility Sink | 45. Main Dining |
| 14. Deep Fat Fryer | 30. Public Rest Rooms | 46. Waitress/Waiter Station |
| 15. Broiler | 31. Office | 47. Banquet Room |
| 16. Spreader | 32. Spice Rack | |

REPRESENTATIVE/EXAMINE KITCHEN LIGHTING

PLAN -



LEGEND:

-  : 36" T8 FLUORESCENT 4-TUBE FIXTURE
25 WMTG/TUBE, 2250 LUMENS/TUBE
-  : 75 WATT HALOGEN RECESSED FLOOD
LAMP 30 120 VOLT 1000 LUMENS

FOOD SERVICE DATA SHEET

OPERATION NAME: _____

ADDRESS: _____ PHONE: _____

OPERATOR/OWNER: _____

MAILING ADDRESS: _____ PHONE: _____

TYPE OF FOOD TO BE PREPARED AND/OR SERVED: Provide a copy of the menu

EQUIPMENT LIST

All new, used and existing equipment must be of a type approved by the Ashtabula County Health Department.

ITEM/EQUIPMENT	MANUFACTURER	MODEL #	SERIAL #
_____;	_____;	_____;	_____
_____;	_____;	_____;	_____
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_____;	_____;	_____;	_____
_____;	_____;	_____;	_____
_____;	_____;	_____;	_____

This food service data sheet must be submitted with the detailed plans. If more space is needed for the equipment list, please copy this sheet.

