



Naugatuck Valley Health District

98 Bank Street Seymour, CT 06483
T: 203-881-3255 F: 203-881-3259 W: www.nvhd.org

FOOD SERVICE ESTABLISHMENT PLAN REVIEW FEE FORM

This Form Must Be Completed and the Plan Review Fee Paid
Prior to Plan Review

Name of Establishment: _____
(Please Print)

Address of Establishment: _____

Owner/Applicant: _____ Phone: _____

Mailing Address: _____

Email: _____

Prior Name of Establishment (If applicable): _____

New _____ Remodel _____

Date of Planned Opening: _____

Name of Contractor/Applicant: _____ Phone: _____

Contact Person: _____

Type of Service (check all that apply): Restaurant Market/Grocery School/Daycare Caterer
 Deli Other

Hours of Operation: Sunday _____ Thursday _____
Monday _____ Friday _____
Tuesday _____ Saturday _____
Wednesday _____

Number of Seats: _____ Number of Staff (maximum per shift): _____

Total Square Feet of Facility: _____

Maximum Meals to be Served (approximate number): Breakfast _____ Lunch _____ Dinner _____

Sewage Disposal: Sewer Septic System

Water Source: Public Well

FOR OFFICE USE ONLY

Date Fee Paid: _____ Amount: _____ Check Cash Credit Card Receipt #: _____



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FOOD SERVICE PLAN REVIEW
PLEASE READ THESE INSTRUCTIONS COMPLETELY BEFORE PROCEEDING

Please review and complete the attached plan review application, submit all required documents and the plan review application fee to NVHD.

1. Plans must be complete, to scale ($\frac{1}{4}$ " = 1 ft.), and must include the following information:
 - a. Date of plan
 - b. Name, seal, and signature of architect who did plans (if applicable)
 - c. Equipment layout
 - d. Equipment list by manufacturer and model number (commercial grade NSF approved or equal)
 - e. Manufacturer specification sheets or equipment elevations
 - f. Mechanical diagrams, including plumbing, electrical, heating, and ventilation
 - g. Interior finish schedule
2. Required inspections (contact NVHD in advance to make an appointment)
 - a. After plumbing is roughed in
 - b. After wall, floor, and ceiling finishes are in
 - c. After the equipment is installed
 - d. Pre-operation/final inspection
3. Submit copy of a proposed menu and/or all food items being sold.
4. Class 2, 3 or 4 food establishments must have a Certified Food Protection Manager (CFPM) with **a current (not expired) certificate** on the premises at least 30 hours per week (submit copy of cert). Information on how to obtain a CFPM certificate is available from the NVHD office or on the State Health Department website www.ct.gov/dph. **You will not be allowed to open your establishment without fulfilling this requirement.**
5. Establishments classified as 2, 3, or 4 may be required to install an exterior grease interceptor or an automatic grease recovery unit (AGRU). Contact the Water Pollution Control Authority (WPCA) for specific requirements.
6. Preparing baked goods from scratch (cake, cookies, bread, pizza crust, donuts etc.) requires a bakery license from the Department of Consumer Protection (DCP). Soft serve dessert (ice cream) machine also needs a license from DCP (860) 713-6160.
7. The fee for plan review is the same as the regular permit fee and is based on the classification of the operation. Fee(s) must be paid before the plans will be reviewed.
8. You will be notified in writing after your plans are reviewed and approved.
9. A completed application for a Food Establishment Permit must be submitted to the Health District with the appropriate fee before you can obtain a license. The application must include signature approvals of the Building, Zoning Officials, Fire Marshal and Water Pollution Control Authority.

Any changes made to the floor plan, finish list, layout of equipment, or to the equipment list must be approved in advance by the Health District

NAUGATUCK VALLEY HEALTH DISTRICT
FOOD ESTABLISHMENT PLANS & SPECIFICATIONS REVIEW APPLICATION & APPROVAL

FOOD PREPARATION:

1. Certified Food Protection Manager (CFPM) is required for all Class 2, 3 or 4 establishments. Provide a copy of all certificates.
 - ✓ A Designated alternate person is required when the CFPM is not present (form attached).
 - ✓ All non-CFPM are required to have onsite training (form attached).
 - ✓ CFPM must maintain written documentation of designated alternate and training records of individual employees and make these records available to the local health department upon request.

2. Please describe your policy for food workers who are sick or have infected cuts and lesions.

Note: Any employee with vomiting/diarrhea must be excluded for 72 hours from the last symptom.

3. Disposable gloves, utensils and/or food grade paper must be used to minimize handling of ready-to-eat foods. *Latex gloves are not allowed.
4. Produce must be washed prior to use.
Separate food preparation sink with indirect drain provided (air gap)? yes no
5. A probe thermometer must be available to check internal cooking temperatures, monitor cooling and reheating of foods.
6. All foods are from an approved source (FDA, USDA, etc.) yes no
7. **Potentially hazardous items:** Circle categories of time/temperature-controlled items to be handled, prepared, and served:

Thin meats, poultry, fish, eggs	yes	no
Thick meats, whole poultry	yes	no
Salads, sandwiches, veggies	yes	no
Soups, stews, chowders, casseroles	yes	no
Baked goods	yes	no

*A consumer advisory may be required on the menu.

8. If **thawing** food check which methods will be used.
 Under refrigeration Under cold (<70°F) running water Part of the cooking process

9. **Cooling** requirements are 135°F to 70°F within 2 hours and 70°F to 41°F within an additional 4 hours. Indicate which foods (if any) will be cooled prior to service.

Cooling Method	Thick meats	Thin meats	Whole roasts	Sauces	Soups	Thick stews	Rice/pasta	Casseroles	Other
Shallow pans									
Ice bath									
Reduce size/vol									
Cooling wand									
Rapid chill									

*Describe how the cooling process will be monitored: _____

10. **Reheating** of potentially hazardous foods. Describe the procedure you will use to reheat PHF for hot holding (after the food was already cooked and properly cooled) and how you will verify that all parts of the item reach a temperature of 165°F or above for 15 seconds within 2 hours:

11. Describe the procedure used for minimizing the length of time PHFs will be kept in the temperature danger zone (41° F - 135° F) during preparation.

SANITIZING OF EQUIPMENT AND UTENSILS

A 3-compartment sink is required. Sink compartments must be large enough to submerge the largest piece of equipment or utensil used. Must be NSF approved or equal, a single unit and be constructed of stainless steel with stainless steel legs.

Size of each compartment: Length _____ Width _____ Depth _____

Drainboards 2(two) each must be at least 24” in length. One wall mounted wire shelving unit may be substituted for one drainboard (installed the over sink).

Type of sanitizer: Chlorine/bleach (50-100ppm) QUAT (200-400ppm)

Test strips on site: yes no

MECHANICAL DISHWASHER

*Must be NSF approved or equivalent.

Make _____ Model _____

Indirect waste line to sewer

Type of sanitizing: Hot Water Chemical (type) _____

Moisture collection hood is required for all dishwashers using hot water for sanitizing and recommended for all dishwashers.

Hot Water Requirements: _____ gal/hr. of _____ °F water.

Booster heater: Make _____ Model: _____

Heats gal/hr. _____ of water at _____ °F rise.

Detergent and/or sanitizer dispensing equipment: Make _____ Model _____

How will cooking equipment, cutting boards, counter tops and other food contact surfaces which cannot be submerged in sinks or put through a dishwasher be sanitized? (i.e., meat slicer/grinder) _____

HOT WATER SUPPLY

*Must be commercial grade/gallon minimum based on operation.

Hot water heater: Make _____ Model: _____

Recovery Rate: _____ gal/hr. at _____ °F rise.

Storage tank capacity: _____ gallons On demand (recommended)

WATER

Source City Well

If well, give depth _____ and method of treatment _____. Well water must be tested annually.

Hot and cold water under pressure must be supplied to all fixtures and equipment requiring water. Public restroom hand sinks at least 100°F, but not over 115°F.

Backflow prevention devices installed on sinks, hose outlets, carbonators, soda guns, slop sinks, dishwasher, spray equipment or any other equipment with a waterline attached to it. yes no

HANDWASHING FACILITIES

*Must be NSF approved, stainless steel, stand alone and wall mounted.

Handwashing facilities are required in all toilet rooms.

Handwashing facilities are required in each food preparation area(s), in food dispensing area(s) and ware-washing area(s).

All handwashing facilities provided with hot and cold water under pressure. No single faucets.

Each handwashing facility provided with soap and sanitary toweling or hand drying device.

DESIGN, CONSTRUCTION, AND INSTALLATION OF EQUIPMENT

All equipment and utensils meet National Sanitation Foundation (NSF) standards or equivalent.

Equipment which is placed on tables or counters either readily movable, sealed thereto, or mounted on legs or feet, at least four (4") inches high to facilitate easy cleaning. yes no

Floor-mounted equipment, unless readily movable (on casters), sealed to floor, or installed on raised platforms of concrete or masonry, or elevated at least six (6") inches above floor. Gas connections on movable equipment must have flexible reinforced approved gas pipe. yes no

All floor-mounted equipment and the space between adjoining units, and between a unit and an adjacent wall, must be either closed or sealed if exposed to seepage, or provide sufficient space to facilitate easy cleaning between, behind, and beside equipment. yes no

USE OF WOOD IN FOOD PREPARATION AREAS IS PROHIBITED.

STORAGE AND HANDLING OF EQUIPMENT AND UTENSILS

All utensils and equipment must be stored at least 6” off the floor: clean, dry and protected from splash and dust. No exposed wood shelving.

WALK-IN REGRIGERATOR AND FREEZER UNITS

Interior finishes must be smooth, non-absorbent, and easily cleanable.

	#1	#2
Floors	_____	_____
Walls	_____	_____
Ceiling	_____	_____
Size	_____	_____

Drain (pitch floor or inside drain with approved air gap).

REACH-IN REFRIGERATOR AND FREEZER UNITS

*Commercial grade NSF approved units are required, domestic/residential type units are not acceptable.

Reach-in refrigerators	No. _____	Size _____
Reach-in freezers	No. _____	Size _____

Will raw meats, poultry and seafood be stored in the same refrigerators and freezer with cooked/ready to eat foods? Yes No

If yes, how will cross-contamination be prevented?

HOT/COLD FOOD HOLDING UNITS

Must be capable of holding foods at 135°F or more or 41°F or less. (Meets NSF Standard #7).

All hot and cold holding and/or storage units must be provided with accurate, numerically scaled thermometers.

Unwrapped food on display (smorgasbord, buffet, etc.), shall be protected against contamination from customers by sneeze guards, display cases, or other effective protective equipment.

Sufficient hot or cold food facilities shall be available to maintain the required temperature of Time/temperature controlled for safety foods (TCS) on display. All TCS foods must be disposed of after the serving period. No re-use of TCS.

If food is transferred to another location, food must be protected from contamination and held at proper holding temperature. List equipment, if applicable _____.

DRY STORAGE FOOD AND FOOD PRODUCTS

Food and food products must be stored at least 6” off the floor, dry, splash free, and not beneath exposed water or sewer lines. yes no

CHEMICAL STORAGE

All toxic and poisonous materials, including cleaning chemicals and sanitizers, must be stored physically separate from food and utensils. Self-applied insecticides and rodenticides are prohibited.

CLEANING EQUIPMENT

Cleaning equipment, mops, brooms, buckets, etc., shall be stored in a separate room separate from food storage, food preparation, utensil washing, and utensil storage areas. Storage racks or hooks provided for storage of brooms and mops.

Floor basin mop sink with back flow prevention required. yes no

TOILET FACILITIES

*Public restrooms are required if seating is provided. Facilities must be separated by sex if total occupant load (employees/customers) is greater than 15. The local Building Official will determine the number of fixtures provided for public use and the requirements necessary for those individuals who are physically challenged.

*Restrooms must be accessible at all times the food establishment is open. If FSE is located within a multipurpose building, restrooms must be located within 500ft by normal pedestrian route.

Toilet facilities are conveniently located for employees and patrons (if applicable): yes no n/a

Toilet rooms accessible without having to walk through kitchen/food prep areas: yes no

Restrooms have self-closing doors: yes no

Sanitary napkin receptacles (covered waste basket) provided: yes no

Toilet rooms must be vented to outside air via vent fan openable window.

Hand sinks are required in ALL RESTROOMS. Public restroom hand sinks at least 100°F but not over 115°F: yes no

Handwashing facility must be provided with: soap sanitary towel/hand drying device

DOORS AND WINDOWS

All outside openings must be tight-fitting to exclude the entrance of insects and rodents.

Openable windows: Screened _____ Air Curtain _____ Self-Closing _____

Outside doors: Screened: _____ Air Curtain _____ Self-Closing _____

LIGHTING REQUIREMENTS

20-foot candles of light at a surface where food is (1) provided for consumer self-service such as buffets and salad bars or (2) where fresh produce or packaged foods are sold or offered for consumption, (3) inside equipment such as reach-in and under-counter refrigerators; and (4) at a distance of 30 inches above the floor in areas used for handwashing, ware washing and equipment and utensil storage, and in toilet rooms.
 yes no

10-foot candles of light in walk-in refrigeration units, dry food storage areas and in all other areas, including dining during cleaning operations. yes no

Protective shielding for all light fixtures in food preparation, utensil and equipment washing areas, and other areas where food is stored or displayed (shatter-proof bulbs may be substituted). yes no

VENTILATION

Ventilation must be adequate so that all areas including restrooms are kept reasonably free from excessive heat, steam, condensation, vapors, fumes, or objectionable odors.

Ventilation systems must be exhausted to the outside air and conform to NFPA Standard 96. Moisture collection hood is required for all mechanical dishwashers using hot water for sanitizing and recommended for all dishwashers.

Ventilation hoods and devices must be designed to prevent grease or condensation from dripping out of the hood or device.

Ventilation system filters must be readily removable for cleaning.

Cubic feet per minute of air exhausted through hood _____.

Fire prevention or extinguishing equipment must be installed so that it does not create cleaning problem or compromise the integrity or original design of hood. yes no

Intake air ducts must be designed and located to prevent the entrance of dust, dirt, insects, exhausted air, etc.

GARBAGE/TRASH STORAGE AREAS

Sufficient cans or dumpster to completely hold trash and garbage generated. Grease dumpster, if needed.

Tightly fitting covers, doors. Watertight and rodent proof. yes no

Storage area easily cleanable. yes no Total storage volume _____.

Adequate collection schedule. yes no Collection days _____.

Arrangements for scheduled pick-up times must be frequent enough to allow receptacle covers to remain closed at all times.

WASTE DISPOSAL

Class 2, 3 & 4 Establishments must install an exterior grease interceptor 1000 gals. or larger or an Automatic Grease Recovery Unit (AGRU). Interior grease traps **not** acceptable. Contact the Water Pollution Control Authority (WPCA) for specific requirements.

All equipment requiring indirect waste lines properly drained into floor sinks or drains.

Floor sinks or drains accessible for cleaning and maintenance. yes no

SMOKING

Connecticut Law does not allow smoking in restaurants, bars, taverns, or cafes. Sign must be posted at the entrance to the food service establishment.

FLOORS

Must be commercial grade smooth, impervious, non-absorbent, light colored and easily cleanable.

	Material	Finish	Color
Food preparation area(s)	_____	_____	_____
Ware washing area	_____	_____	_____
Restrooms	_____	_____	_____
Storage Rooms	_____	_____	_____

WALLS

Must be fire rated, smooth, impervious, non-absorbent, light colored and easily cleanable. Area behind grills/stoves must be stainless steel or ceramic tile. Fiberglass reinforced plastic (FRP) or tile required for all other kitchen areas.

	Material	Finish	Color
Food preparation area(s)	_____	_____	_____
Ware washing area	_____	_____	_____
Restrooms	_____	_____	_____

Exposed waterlines, waste lines, gas lines, or conduits are prohibited.

Junctures between floor and wall must be covered. Material: _____

CEILINGS

Must be smooth, impervious, non-absorbent, light in color, and easily cleanable. Suspended ceiling tiles must be sheetrock backed, vinyl faced USG 3270 or equivalent. (Porous tiles not acceptable).

	Material	Finish	Color
Food prep. area(s)	_____	_____	_____
Ware washing area	_____	_____	_____
Restrooms	_____	_____	_____

*Exposed waterlines, waste lines, gas lines, or conduits are prohibited.

BAR (if applicable)

FLOOR Must be commercial grade smooth, impervious, non-absorbent, light colored and easily cleanable

Material: _____ Finish: _____ Color: _____

Duckboards removable, easily cleanable. yes no

Junctures between floor and wall must be covered. Material: _____

WALLS Must be fire rated, smooth, impervious, non-absorbent, light colored and easily cleanable

Material: _____ Finish: _____ Color: _____

CEILING Must be smooth, impervious, non-absorbent, light in color, and easily cleanable. Suspended ceiling tiles must be sheetrock backed, vinyl faced USG 3270 or equivalent. (Porous tiles not acceptable).

Material: _____ Finish: _____ Color: _____

LIGHTING

Must have at least 20-foot candle power of light over ware washing and work areas. Protective shielding is required for all light fixtures (shatter-proof bulbs may be substituted). yes no

HANDWASHING

Handwashing facility is required. Soap and sanitary toweling or hand drying device must be provided.

EQUIPMENT

*All equipment must be commercial grade NSF approved or equivalent.

Drop-in cold plates in ice machines or jockey boxes are **not** approved.

Ice storage bins. yes no If yes, must be indirect waste. Protected with splash guards. yes no

Dump sink is required. Proper installation of mix and liquor guns & drain lines.

SANITIZING OF EQUIPMENT AND UTENSILS

NSF approved three compartment sink with adequate drain boards is required.

Mechanical glass washer: Make _____ Model _____

Type of sanitizing: Hot Water Chemical (type) _____

Indirect waste line to sewer.

Where will clean glass be stored: _____

STATEMENT I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior permission from the Health District may nullify an approval.

Signature(s) _____

(Owner or responsible representative)

Date _____

Approval of these plans and specifications by the Health District **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 of the completed establishment (structure or equipment). A pre-operational inspection of the establishment will be necessary to determine if it complies with the local and state laws governing food establishments.