

General Food Plan Review Application

Application must be completed in full and submitted with fee and the items listed for processing:

Reviewed by _____ EHS Initials

TYPE OF PLAN REVIEW (Check applicable box)				
<input type="checkbox"/> \$500 (PE 5672) plus \$185 per hour after 2 hours	New food service establishment			
<input type="checkbox"/> \$185 Base fee plus \$185 per hour for each add'l hour over 1 hour (PE 5685)	Remodel of existing food service establishment or revision of approved plan			
<input type="checkbox"/> \$335 Base fee plus \$185 per hour for each add'l hour (PE 5685 & 5642)	Change of ownership / conditional operating permit AND remodel of existing food service establishment or revision of approved plan			
<input type="checkbox"/> \$185 (PE 5682) per inspection	Reopen former food service establishment			
<input type="checkbox"/> \$185 (PE 5670)	New Limited Grocery, Tap Room / Tasting Room			
<input type="checkbox"/> \$185 plus lab fees (PE 5683)	HACCP – when required by WAC for menu items			
<input type="checkbox"/> \$500 Base fee plus \$185 for each add'l permit (PE 5676 & 5675)	New multiple permit food service establishment (large grocery store)			
<input type="checkbox"/> \$185 (PE 5677)	Plan review consultation (On and/or off site)			
<input type="checkbox"/> NO FEE Out of County Mobile (PE 56MR)	Mobile operators from King or Pierce Counties			
ESTABLISHMENT INFORMATION		MAILING ADDRESS		
Name:		Name:		
Site Address:		Mailing Address:		
City:	ZIP:	City:	State:	ZIP:
OWNER INFORMATION				
Name:		Phone:		
Address:		E-mail Address:		
City:		State:	Zip:	
CONTACT INFORMATION (if different than owner)				
Name:		Phone:		
Address:		E-mail Address:		
City:		State:	Zip:	
OTHER INFORMATION				
Type of Food Service Establishment:				
Local Building Inspection Agency:				
Water District:	Water Supply (check one):	<input type="checkbox"/> Private Well <input type="checkbox"/> Public		
Sewer District:	Sewage Disposal (check one):	<input type="checkbox"/> Sewer <input type="checkbox"/> Onsite Sewage System		
<i>Inspection is based upon requirements of WAC 246-215; Rules & Regulations of the State Board of Health for Food Service Sanitation. Other agency approvals requisite to your operation may include County or City Planning, Building, Plumbing and Fire Departments, Water and Sewer Utilities.</i>				
<i>Signature of the owner or an officer of the legal ownership affirms the accuracy of the information provided in this application and that the permitted facility will be operated in compliance with the rules of the Washington State Food Code.</i>				
Signature:		Date:		
Print Name:				

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Environmental Health Division

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