

**Facility name:** \_\_\_\_\_

This checklist will help you prepare a complete plan review packet. Submit the completed plan review packet and checklist with the required application fee. Incomplete plan review packets will not be accepted. Make a copy of this plan review packet for your records prior to submittal. Plan review fees are non-refundable.

<input checked="" type="checkbox"/>	ITEM	DESCRIPTION	Office Use Only
			<b>Intake</b>
1	General Application Page	<b>Provide complete Food Plan Review application page.</b>	
2	Plan Review Questionnaire	<b>Complete the Plan Review Questionnaire form.</b>	
3	Water and Sewer Review	<b>Complete the Water &amp; Sewer Review form.</b>	
4	Equipment List	<b>Provide make and model numbers of all equipment</b> including countertop appliances and plumbing fixtures. Show location on the floor plan. Only commercial grade, National Sanitation Foundation (NSF) or equivalent equipment is acceptable.	
5	Finish Schedule	<b>Complete the Finish Schedule form.</b> Provide the materials used for all floors, walls, ceilings, counters and cabinets.	
6	Food Sources	<b>Complete the Food Sources form.</b> Include general descriptions of what food items will be received from each supplier.	
7	Catering Questionnaire and review fee <i>(if applicable)</i>	<b>Provide complete Catering Questionnaire if applicable</b> along with all other requested documents as stated in that form. For caterers utilizing a commissary kitchen, the Commissary Agreement form should also be included.	
8	Floor Plan	<b>Provide a floor plan of the entire facility.</b> Floor plan must show location of all equipment (sinks, refrigeration, cooking, hoods, blenders, countertop appliances, etc.), restrooms, storage areas, outdoor cooking areas, etc. Floor plan must be drawn to scale, and measurements included.	
9	Menu(s)	<b>Provide a detailed menu(s) of all the food and beverages you will be serving.</b> All breakfast, lunch, dinner, bar/lounge, happy hour, kids, catering, and other menus must be submitted.	
10	Food Preparation Steps	<b>Provide a detailed description of how all food and beverages will be prepared</b> using the provided description and examples as a guide.	
11	Business License	<b>Provide a copy of your Washington State Department of Revenue issued business license.</b>	
12	Fee	<b>Include application fee.</b>	

<b>Application must be completed <u>in full</u> and submitted <u>with fee(s)</u> and the items listed for processing:</b>				
Reviewed by:			PA Initials:	
<b>TYPE OF PLAN REVIEW (Check applicable box)</b>				
	\$1100 (PE 5672) General Food Plan Review	New food service establishment plan review and pre-operational inspection fee		
	\$250 (PE 5670) Tap Room / Tasting Room Plan Review	New tap room / tasting room plan review and pre-operational inspection fee		
	\$1100 Multiple Permit Facility General Plan Review base fee <b>plus</b> \$305 for each additional permit (PE 5676 & PE 5675)	New multiple permit food service establishment. New food service establishment with multiple permits (I.e., deli, meat/fish, etc.). Fee includes plan review and pre-operational inspection.		
	\$500 (PE 5642) Change of Ownership	Change of ownership includes inspections.		
	\$305 (PE 5685) Alteration to Existing Establishment/Approved Plan	Alteration to currently permitted food service establishment or revision of approved plan. Includes plan review and pre-operational inspection.		
	\$235 (PE 5677) Consultation Fee	Plan review consultation (on or offsite)		
	\$900 (PE 5683) HACCP Review (with or without variance)	Hazard Analysis Critical Control Point (HACCP) plan review with or without a variance – when required by WAC for food proposed food preparation steps. Includes plan review and pre-operational inspection.		
	\$235 (PE 56AM) Variance Request without HACCP Review	Variance request without HACCP Plan review. Includes plan review and pre-operational inspection.		
<b>ESTABLISHMENT INFORMATION</b>			<b>ESTABLISHMENT MAILING ADDRESS</b>	
Establishment Name:			Name:	
Site Address:			Mailing Address:	
City:	ZIP:	City:	State:	ZIP:
<b>OWNER INFORMATION (should match business license)</b>				
Name:			Phone:	
Address:			E-mail Address:	
City:			State:	Zip:
<b>CONTACT INFORMATION (if different than owner)</b>				
Name:			Phone:	
Address:			E-mail Address:	
City:			State:	Zip:
<p><i>Review is based upon requirements of WAC 246-215; Rules &amp; Regulations of the State Board of Health for Food Service Sanitation. Other agency approvals required prior to permitting with the Snohomish County Health Department may include county or city Planning, Building, Plumbing and Fire Departments, Water and Sewer Utilities.</i></p> <p><i>Signature of the owner or appointed contact person 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 Retail Food Code.</i></p>				
Signature:			Date:	
Print Name:				



Facility Name: \_\_\_\_\_

Provide a description (the scope) of your project:

1. How many times per week do you anticipate receiving refrigerated/frozen ingredients?  
\_\_\_\_\_
2. How many times per week do you anticipate receiving dry goods (i.e., to-go containers, flour, coffee, etc.)?  
\_\_\_\_\_
3. How many meals do you anticipate serving per day? (Breakfast/Lunch/Dinner/Other)  
\_\_\_\_\_
4.  Yes  No  
Is there customer seating inside the facility?  
If yes, how many seats are in the facility, including the bar and lounge \_\_\_\_\_
5.  Yes  No  
Is there customer seating outside the facility? How many seats are outside? \_\_\_\_\_
6.  Yes  No  N/A  
If you have customer seating, is your restroom accessible to customers without passing through food preparation, food storage and/or dishwashing areas?
7.  Yes  No  
Do you have to go outside to access any walk-in refrigeration/freezers, food storage, equipment, or dry storage areas? All locations must be clearly marked on floor plans.
8.  Yes  No  
Is a drop ceiling installed over all food preparation, food service, and dishwashing areas? Exposed greywater lines, piping, ventilation, and wiring are not allowed.  
If No, describe the setup and materials of the ceiling
9. Where will chemicals such as cleaning products be stored?
10. Where will employee belongings be stored?

11. How will you prevent pest entry?

12.  Yes  No

Will any food, beverages or condiments be self-service?

If yes, list each item and how you will prevent contamination:

13.  Yes  No

Will you be making and serving cocktails with garnishes in a separate bar area?

14.  Yes  No (Required)

Is all equipment commercial grade, NSF certified or equivalent?

15.  Yes  No

Are all handwash sinks accessible within 25 feet of all food preparation, food service and dishwashing areas without having to pass through any doors or otherwise separate areas?

16.  Yes  No

Does your 3-compartment sink have attached drainboards on both sides, rounded corners, and basins large enough to submerge and wash all equipment?

17.  Yes  No

Can you completely fill one compartment of the 3-compartment sink with 110°F water and provide 100°F water at all handwash sinks for 20 seconds each?

18.  Yes  No

Are indirect drains (i.e., air gap) provided for all food preparation sinks, dishwashers, ice machines, soda dispensers, steam tables, woks, dipper wells, espresso machines, beer tap drip trays, walk-in refrigeration/freezers, and all equipment in which food or food contact equipment is placed (Required)? (Buckets are not allowed)

19.  Yes  No

Does your menu include fresh or canned produce items, such as lemons, limes, onions, tomatoes, potatoes, canned olives, herbs, rice or berries?

Yes  No

If yes, is the indirectly drained food preparation sink with an integral drainboard included in your proposed floor plan?

20.  Yes  No

Will you receive and/or store any frozen raw meat, poultry or seafood?

If yes, list:

21.  Yes  No

Will any food of animal origin be undercooked at the customer's request, such as steaks, eggs, or hamburger?

If yes, list your proposed consumer advisory statement:

22.  Yes  No

Will any fresh, unfrozen fish be offered by customer request as partially cooked?

If yes, list your separate consumer advisory for parasite risk:

23.  Yes  No  N/A

If fish or seafood will be served raw or undercooked, is proper parasite destruction documentation submitted?

24.  Yes  No

If raw meat, poultry, or seafood will be prepared, a second indirectly drained food preparation sink with an integral drainboard is required. Is one included on the current floor plan?

25. How will you protect food and food contact surfaces in your kitchen from possible sources of contamination(i.e., dirty water, cross-contamination, etc.)? Check all that apply

Splash guards  Physical separation  Other:

26.  Yes  No

Are soap and paper towel dispensers installed where water droplets from handwashing/drying will not contaminate any food or food contact surfaces?

27.  Yes  No

Is your handwash sink(s) at least 8"x8" and large enough to fit both hands at the same time?

28.  Yes  No

Is the mop sink located so food and equipment are not contaminated when used?

29.  Yes  No

Will a faucet with a hose attachment or a chemical dispensing system be installed at the mop sink?

Yes  No

If yes, Does the mop sink have a vacuum breaker installed?

30.  Yes  No

Is your facility currently connected to a public fresh water supply?

31. Please indicate which type of wastewater connection is available at your facility:

Public sewer system  Approved Septic System

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32. Will your building department or fire marshal require a hood system for your intended menu and equipment?

Building Department Name \_\_\_\_\_

Name of Official \_\_\_\_\_

33.  Yes  No  N/A

If a soda fountain system is used, will it be installed by a professional beverage system contractor (i.e., Coca-Cola) who can verify that a reduced pressure backflow assembly (RPBA) installed and tested?

34.  Yes  No

Will any food be stored or prepared at another location? If yes, list name and address where food will be stored or prepared:

35.  Yes  No (Required)

Have you already reached out to your local building department to apply for a plumbing permit for this establishment?

36. Please list the company or service provider you will utilize for garbage removal

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

37. If you have a deep fryer, please list the company or service provider you will utilize for waste oil removal

Name: \_\_\_\_\_ Phone \_\_\_\_\_

38. Proposed hours of operation:

Open 24 hours everyday  Seasonal; \_\_\_\_\_

Day	From	AM/PM	To	AM/PM
Sunday		<input type="checkbox"/> Am <input type="checkbox"/> Pm		<input type="checkbox"/> Am <input type="checkbox"/> Pm
Monday		<input type="checkbox"/> Am <input type="checkbox"/> Pm		<input type="checkbox"/> Am <input type="checkbox"/> Pm
Tuesday		<input type="checkbox"/> Am <input type="checkbox"/> Pm		<input type="checkbox"/> Am <input type="checkbox"/> Pm
Wednesday		<input type="checkbox"/> Am <input type="checkbox"/> Pm		<input type="checkbox"/> Am <input type="checkbox"/> Pm
Thursday		<input type="checkbox"/> Am <input type="checkbox"/> Pm		<input type="checkbox"/> Am <input type="checkbox"/> Pm
Friday		<input type="checkbox"/> Am <input type="checkbox"/> Pm		<input type="checkbox"/> Am <input type="checkbox"/> Pm
Saturday		<input type="checkbox"/> Am <input type="checkbox"/> Pm		<input type="checkbox"/> Am <input type="checkbox"/> Pm

**This section includes procedures that require additional documentation for review and approval. Please read carefully and submit separate documents for each if applicable:**

**Review with no additional fees:**

39.  Yes  No

Do plan to allow customers to bring in their own take-home containers to be refilled with food or TCS beverages?

If yes, attach a written plan in accordance with WAC 246-215 (03348) for review and approval. The written plan should address the listed requirements below. An approved plan also includes the methods of training employees and corrective actions to ensure compliance.

- i. How employees will inspect containers prior to refilling to ensure they are visibly clean and constructed of appropriate, cleanable material.
- ii. Methods for active monitoring of dispensing areas.
- iii. What contamination-free process will be used when refilling consumer-owned containers.
- iv. When corrective actions will be required.

40.  Yes  No

Do you plan to allow non-service dogs in your outdoor seating areas?

If yes, attach a written plan in accordance with WAC 246-215 (06570) for review and approval. The written plan should address the listed requirements below. An approved plan also includes the method of training employees and corrective actions to ensure compliance.

- i. Dogs are on a leash or in a carrier and under the control of their owner.
- ii. Dogs do not go through any areas of drink preparation or glassware storage to reach the customer areas where they are allowed.
- iii. Dogs are not allowed on tables, chairs, benches, seats or other fixtures in the establishment.
- iv. Any food or drink containers provided for dogs are not washed or rinsed in the establishment.
- v. Employees do not have direct contact with dogs.
- vi. The outdoor area is maintained clean of animal waste.
- vii. The owner of the establishment ensures compliance with local ordinances related to sidewalks, public nuisance, and sanitation.

41.  Yes  No

Will any food be cooked or hot held unattended (i.e., overnight or more than 2 hours of unattended cooking)?

If yes, submit the make and model for the data logging equipment and a detailed standard operating procedure for additional review.

42.  Yes  No

Do you intend to rescue surplus foods for donation or re-service in your establishment? *Note: "Re-service" is the process of offering foods for sale again that were previously on display in a self-service buffet but were not selected or handled by customers in any way. Other conditions will apply per WAC (03372.2-3).*

If yes, please submit a written plan that includes the following information for further review:

- i. Types of foods that will be available for donation (or re-service if your facility will have a buffet or self-service station and wishes to reserve excess foods).
- ii. Employee training and designation for rescued food handling procedures.
- iii. Location of donated food storage within the establishment and methods.
- iv. Food Bank(s) or Donor Kitchen(s) receiving donations from your establishment.

43.  Yes  No

Will there be any cooking or food preparation outside the establishment? All locations must be clearly marked on floor plans.

44.  Yes  No

Will any menu items include wild mushrooms? If yes, list the supplier and proposed species offered:

**Separate submission required with \$305 additional review fee:**

45.  Yes  No

Will you offer catering? If yes, complete the catering questionnaire.

**Separate submission required with \$900 review fee for each process (46-53):**

46.  Yes  No

Will any food be smoked as a method of food preservation rather than flavor enhancement? (Used to preserve or change a food so it no longer requires refrigeration)  
If yes, a separate HACCP application must be submitted for review.

47.  Yes  No

Will any food be cured?  
If yes, a separate HACCP application must be submitted for review.

48.  Yes  No

Will any food additives be used to preserve or change a food so it no longer needs to be refrigerated?  
If yes, a separate HACCP application must be submitted for review.

49.  Yes  No

Will a display tank be used for molluscan shellfish, such as oysters or clams?  
If yes, a separate HACCP application must be submitted for review.

50.  Yes  No

Will custom processing of animals be offered for a customer's personal use as food (i.e., deer) and not for sale or service in a food establishment?

If yes, a separate HACCP application must be submitted for review.

51.  Yes  No

Will you be sprouting seeds or beans for sale or service in the food establishment?

If yes, a separate HACCP application must be submitted for review.

52.  Yes  No

Will any food be vacuum packaged or reduced oxygen packaged? If yes, submit additional information as noted in the Vacuum Packaging-Reduced Oxygen Packaging questionnaire.

If yes, a separate HACCP application must be submitted for review.

53.  Yes  No

Will any food be cook-chill or sous vide? If yes, submit additional information as noted in the cook-chill or sous vide questionnaire.

If yes, a separate HACCP application must be submitted for review.



Fill out this form if you are connected to city water and/or sewer services or are planning on having an on-site septic system.

Facility name: \_\_\_\_\_

Site address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contact name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Proposed number of seats: \_\_\_\_\_

Yes  No **Are you a newly constructed facility?**

Yes  No **Are you making changes to an existing facility?**

Yes  No **Do you have an approved grease interceptor in your facility?**

Your local water/sewer district may require an approved grease interceptor to be installed in the facility. We recommend contacting your local water/sewer agency for information regarding grease interceptor installation.

**WATER SYSTEM**

This section should be completed by contacting your local public water system official (if different from sewer) and informing them of the scope of your project and proposed new facility address. If necessary, a letter of availability may be provided for new construction.

Name of Public Water Utility Provider: \_\_\_\_\_

Full Name of Water System Official: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Water System Official: \_\_\_\_\_ Date: \_\_\_\_\_

**WASTEWATER SYSTEM**

**Which type of wastewater system will your facility be connected to?**

Public Sewer System     On-site Septic System    \_\_\_\_\_(Initial)

**On the next page:**

Fill out the Public Sewer System section if you are planning on being connected to a public sewer system.

Fill out the On-site Septic System section if you are planning on being connected to an on-site septic system.

## **Public Sewer System**

This section should be completed by contacting your local public sewer system official and informing them of the scope of your project and proposed new facility address. A letter of availability may be provided for new construction.

Name of Public Sewer Utility Provider: \_\_\_\_\_

Full Name of Sewer System Official: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Sewer System Official: \_\_\_\_\_ Date: \_\_\_\_\_

## **On-site Septic System**

If your facility will be connected to an on-site septic system, your application will also need to be reviewed for approval by the Snohomish County Health Department Land Use team.

New  Existing **Is your septic system new or existing?**

After your initial review by the Land Use team, you may be approved, or you may be required to complete some or all of the following:

- Hire a licensed septic system designer or engineer to evaluate the existing on-site septic system and proposed operational/menu changes, and submit one of the following to the Snohomish County Health Department:
  - A statement of adequacy, with reasoning, of existing on-site septic system to support proposed operational/menu changes, or
  - An application for a redesign of the on-site septic system.
- Complete a satisfactory Operation and Maintenance (O&M) septic inspection less than 1 year old. For a list of septic service companies to complete inspection, visit our website at: <https://www.snohd.org/687/Find-a-Septic-Contractor>
- Provide the Snohomish County Health Department with a signed monitoring and maintenance agreement, specific to your on-site septic system, between the owner of the on-site septic system and a certified contractor.

## AGENCY LIST:

<b>Water and Sewer Agencies</b>	<b>Contact</b>
Alderwood Water and Wastewater District	425-787-0220, <a href="http://www.awwd.com">www.awwd.com</a>
Lake Stevens Sewer District	425-334-8588, <a href="http://www.lkstevensseswer.org">www.lkstevensseswer.org</a>
Mukilteo Water and Wastewater District	425-355-3355, <a href="https://www.mukilteowwd.org/">https://www.mukilteowwd.org/</a>
Silver Lake Water and Sewer District	425-337-3647, <a href="https://slwsd.com/">https://slwsd.com/</a>
<b>Building Departments</b>	
Arlington Building Department	360-403-3551 <a href="https://www.arlingtonwa.gov/243/Building-Permits">https://www.arlingtonwa.gov/243/Building-Permits</a>
Bothell Building Department	425-806-6400 <a href="http://www.ci.bothell.wa.us/337/Permit-Center">http://www.ci.bothell.wa.us/337/Permit-Center</a>
Darrington Building Department	360-436-1131 <a href="https://townofdarrington.com/Departments/building-and-planning/">https://townofdarrington.com/Departments/building-and-planning/</a>
Edmonds Building Department	425-771-0220 <a href="http://www.edmondswa.gov/2011-08-03-22-54-45/building-divison-home.html">http://www.edmondswa.gov/2011-08-03-22-54-45/building-divison-home.html</a>
Everett Building Department	425-257-8810 <a href="https://everettwa.gov/169/Permit-Services">https://everettwa.gov/169/Permit-Services</a>
Gold Bar Building Department	360-793-1101 <a href="https://cityofgoldbar.us/city-services/permits/permit-applications/">https://cityofgoldbar.us/city-services/permits/permit-applications/</a>
Granite Falls Building Department	360-691-6441 <a href="http://ci.granite-falls.wa.us/?page_id=854">http://ci.granite-falls.wa.us/?page_id=854</a>
Lake Stevens Building Department	425-622-9400 <a href="https://www.lakestevenswa.gov/158/Permit-Center">https://www.lakestevenswa.gov/158/Permit-Center</a>
Lynnwood Building Department	425-670-5400 <a href="https://www.lynnwoodwa.gov/Services/Apply-for-a-Permit/Building-and-Construction-Permits/Commercial-Permits">https://www.lynnwoodwa.gov/Services/Apply-for-a-Permit/Building-and-Construction-Permits/Commercial-Permits</a>
Marysville Building Department	425-363-8100 <a href="https://www.marysvillewa.gov/109/Permit-Services">https://www.marysvillewa.gov/109/Permit-Services</a>
Mill Creek Building Department	425-551-7254 <a href="https://www.cityofmillcreek.com/city_government/public_works_and_development_services/building">https://www.cityofmillcreek.com/city_government/public_works_and_development_services/building</a>
Monroe Building Department	360-863-4501 <a href="http://www.monroewa.gov/93/Permitting">http://www.monroewa.gov/93/Permitting</a>
Mountlake Terrace Building Department	425-744-6267 <a href="https://www.cityofmlt.com/177/Building-Permits">https://www.cityofmlt.com/177/Building-Permits</a>
Mukilteo Building Department	425-263-8075 <a href="https://mukilteowa.gov/departments/planning-development/permits/?cn-reloaded=1">https://mukilteowa.gov/departments/planning-development/permits/?cn-reloaded=1</a>
Snohomish Building Department	360-282-3156 <a href="https://www.snohomishwa.gov/661/Permitting">https://www.snohomishwa.gov/661/Permitting</a>
Stanwood Building Department	360-629-2181 <a href="https://stanwoodwa.org/205/Building-Permitting">https://stanwoodwa.org/205/Building-Permitting</a>
Sultan Building Department	360-793-2231 <a href="https://www.ci.sultan.wa.us/171/Building">https://www.ci.sultan.wa.us/171/Building</a>

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### Environmental Health Division

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Facility name: \_\_\_\_\_

List **all food service equipment**, including make and model numbers. Examples include, but are not limited to refrigerators, sinks, stoves, ovens, steam tables, blenders, ice machines, ventilation hoods, and all countertop appliances. If make and model number cannot be found, a picture of the equipment is required. **The item numbers on this list must be the same as the item numbers for the equipment on the floor plan.**

Equipment must be commercial grade and meet American National Standards Institutes (ANSI) standards (NSF, ETL Sanitation or UL EPH listed). "Commercial", "Professional", and "Business" labels do not meet this requirement.

**Sample Equipment List**

# On floor plan	Kind of equipment	Make	Model #
1	2 Door upright refrigerator	True	T-49-HC
2	Ice machine	Manitowoc	IYT0300A
3	Rice cooker	Avantco	RW92
4	3-compartment dish wash sink (with 2 drainboards)	Advanced Tabco	FC-3-2030-20RL

# On Floor Plan	Kind of Equipment	Make	Model #
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			

*Extra space is provided on the next page if needed.*



**Facility name:** \_\_\_\_\_

- All bare wood surfaces (doors, trim, counters, shelves, cabinets, etc.) must be sealed so that they are smooth and nonabsorbent.
- Floors throughout must be constructed of smooth, easily cleanable, non-absorbent material including customer seating areas.
- Coving must be installed at all wall/floor junctions.
- Walls must be constructed of light colored, smooth, easily cleanable, non-absorbent materials. Provide Fiber Reinforced Plastic (FRP), laminate plastic, tile, or similar waterproof material on wall surfaces behind sinks, dishwashers, food preparation areas, and areas exposed to moisture.
- Ceilings above any areas of open food handling or preparation must be constructed of smooth, easily cleanable, non-absorbent materials. Unsealed and or perforated acoustical ceiling tiles are not allowed. Vinyl covered ceiling tiles such as vinyl rock or other washable surfaces are allowed. Exposed greywater lines, piping, ventilation, rafters, and wiring are not allowed.
- All lighting over food preparation, handling and storage areas must have covers or shatterproof bulbs.

**Sample finish schedule**

	Floors	Coving	Walls	Ceiling	Counters
<b>Kitchen</b>	<i>vinyl tile</i>	<i>6" rubber base</i>	<i>FRP</i>	<i>painted gypsum board</i>	<i>laminate</i>
<b>Wait area</b>	<i>vinyl tile</i>	<i>4" rubber base</i>	<i>painted gypsum board</i>	<i>vinyl rock</i>	<i>laminate</i>
<b>Lounge</b>	<i>sealed concrete</i>	<i>4" rubber base</i>	<i>varnished wood</i>	<i>Armstrong VL tiles</i>	<i>granite</i>
<b>Dining area</b>	<i>carpet</i>	<i>4" rubber base</i>	<i>painted gypsum board</i>	<i>painted gypsum board</i>	<i>n/a</i>
<b>Bathrooms</b>	<i>ceramic tile</i>	<i>ceramic tile</i>	<i>painted gypsum board</i>	<i>painted gypsum board</i>	<i>laminate</i>

<b>Shelving</b>	<i>Refrigerators and dry storage: stainless steel wire shelves; liquor storage: varnished wood</i>
<b>Lighting</b>	<i>Bar lights are shatterproof. All kitchen lights have covers.</i>

**Finish schedule**

	Floors	Coving	Walls	Ceiling	Counters
<b>Kitchen</b>					
<b>Wait area</b>					
<b>Lounge</b>					
<b>Dining area</b>					
<b>Bathrooms</b>					

<b>Shelving</b>	
<b>Lighting</b>	

**Facility name:** \_\_\_\_\_

**List all food and beverage suppliers you will be using for which foods, ingredients and other needed supplies.** Please look at the example provided and complete the blank table below, listing each supplier, and the products you plan to purchase from each one. The list does not have to be fully exhaustive or specific, but rather a general overview of your sources for foods such as meats, dairy, produce, dry goods or commercially prepared foods and food-contact utensils.

*This list is provided as an example only and for the convenience of the user. This should not be taken as an endorsement by the Snohomish County Health Department. This is not a complete list of available suppliers.*

Example Food Source List:

<b>Name of supplier</b>	<b>Products Received</b>
Charlie's Produce	Fresh Fruits, Fresh Vegetables
US Foods Chef Store	Coffee Syrups, Frozen Produce, Dairy Products, Bottled Sodas
Costco Wholesale	Raw meats, eggs
Sysco	Canned goods, commercially prepared dressings, flour
Restaurant Depot	Takeout boxes, silverware
Pacific Seafood	All seafood on menu

**Your Food Source List**

<b>Name of Supplier</b>	<b>Products Received</b>

**\*ONLY COMPLETE THIS FORM IF YOU ARE PLANNING ON BEING PERMITTED AS A CATERER WITH YOUR ANNUAL CATERING PERMIT OR CATERING ENDORSEMENT.**

**A caterer is** a person or business that contracts with a client to prepare a specific menu and amount of food in an approved food establishment for service to the client's guests or customers at a different location; may cook or perform final preparation on certain food at the service location. May be a non-storefront based, pre-ordered meal delivery service operating out of an approved commissary kitchen.

**A caterer is NOT** a person or business that prepares a specific menu or amount of food in an approved establishment where the food is then picked up or delivered without any open food handling or preparation outside of the approved food establishment.

CATERING ENDORSEMENT/PERMIT COSTS:

<b>Caterer Annual Permit Fee – Varies</b>	An operator that does not have a brick-and-mortar facility who provides catered meals for private events.
Low risk: \$500	
Medium Risk: \$745	
High Risk: \$1025	An annually permitted food service establishment that also provides catering services.
<b>Catering Endorsement Annual Permit Fee</b>	
Additional permit fee \$250	

Check the **one** option below that applies to the purposes of this application:

- I am a New Food Service Establishment applying for a permit and would like to offer catering.
- I am an existing Food Service Establishment that would like to add a catering endorsement.
- I am starting a catering business. \*If this option is selected, please complete the [Commissary Agreement](#)

Check all proposed methods of service:

- Self-Service Buffet Line** (onsite catering staff stocks, refills and monitors a buffet as needed)
- Served Buffet Line** (onsite catering staff handles all food and utensils at point of service)
- Table Service** (guests are seated and served in the same manner as a full-service restaurant)

1. What is the maximum number of catered meals you will offer in a day? \_\_\_\_\_

2.  Yes  No

Will your catering menu differ in any way from the menu submitted? If yes, address the checkpoint below.

\* **~CHECKPOINT~** Did you attach a copy of your proposed catering menu that includes quantities of food offered and any items that differ from other menus you may have submitted? \*

3.  Yes  No

Have you addressed any catering-specific menu items in your Food Preparation Steps (required)?

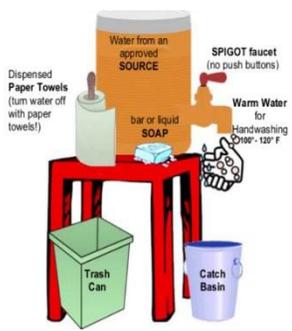
\* **~CHECKPOINT~** Did you update your food preparation steps to include details on how catered menu items will be prepared and transported to offsite events? \*

4. Please complete the table below regarding refrigeration storage capacity designated **for the catering operation only**:

List all refrigeration units dedicated to catering food preparation and storage in your commissary:

Equipment	Make and Model Number	# of shelves in unit
<i>Ex. 6x6 Walk-in refrigerator</i>	<i>Amerikooler QC060672</i>	<i>3 wire shelving units 18"x48"</i>

5. Please select which portable handwashing facilities you will be using for catered events from the options below **AND submit a clear picture of your portable handwashing sink setup for review.**



A.



B.



C.

\* ~CHECKPOINT~ Did you attach a photograph of your proposed handwash setup? \*

6. Please complete the table below for all portable service equipment you will use to serve catered foods onsite at events (*i.e. steam tables, Cambros, portable bars, extra serving utensils etc.*) \*Please make additional copies of this table if more space is needed.

Equipment Description	Quantity
<i>Ex. Chafing Dish with lids and Sterno baskets underneath</i>	8

7. What reheating equipment will be used on-site at catered events if food falls below 135°F?
8. Describe the procedures and methods for monitoring holding temperatures while food is on display and being served (*i.e., hourly temperature checks, logbooks, etc.*)

9.  Yes  No

Will you provide dishes, eating utensils and/or glassware at catered events?

a. If yes, please describe how and where dishes are cleaned after the event

b. If no, please provide the proposed company or service provider for rental dishes and glassware (if applicable)

10. Open food and condiments on display must be protected from contamination. Please select all methods you intend to utilize at catered events:

sneeze guards  covers, lids or domes over food containers  active monitoring by staff

11. Describe how food preparation, holding and storage areas will be protected from public access or contamination during events (*i.e., tables, signs, active staff monitoring, etc.*)

12. I understand that leftover food items set out for service must be discarded at the end of service. \_\_\_\_\_ (initial)

13. I understand that unserved food that has warmed or cooled to the temperature danger zone (between 41-135°F) may not be reheated and cooled for later service. \_\_\_\_\_ (initial)

14. I agree to provide the Snohomish County Health Department a monthly catering schedule. \_\_\_\_\_ (initial)



**SNOHOMISH  
COUNTY HEALTH DEPARTMENT**

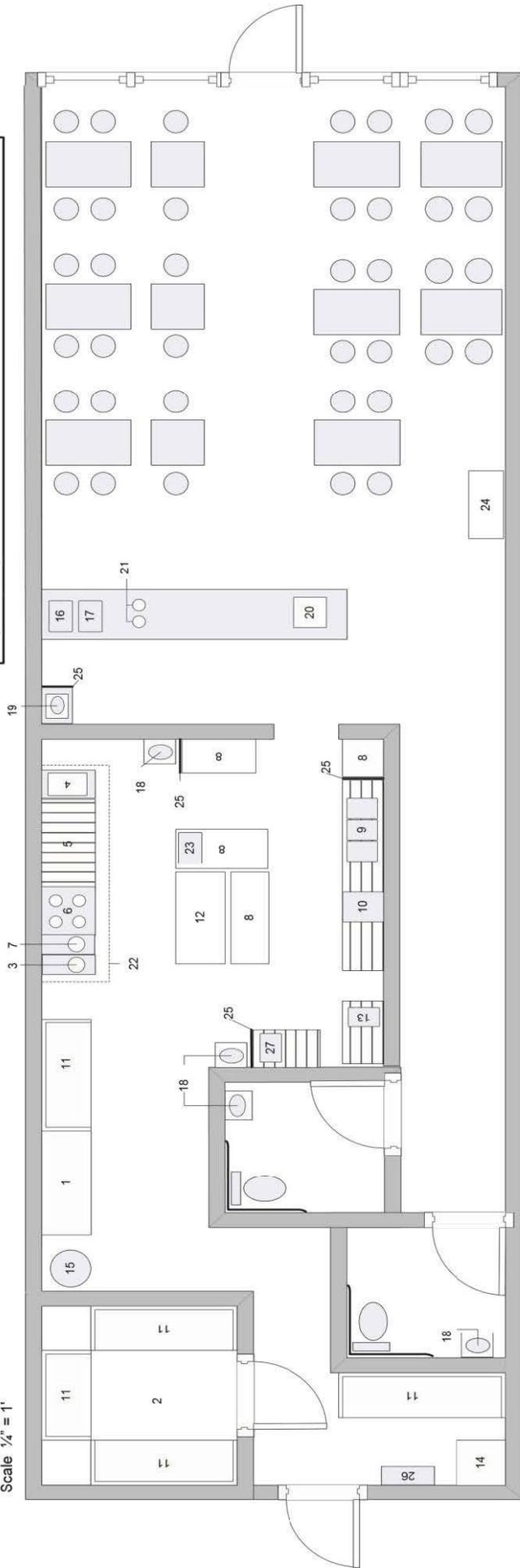
# Example Floor Plan

#	Item Name	Qty	Make	Model
1	Freezer	1	ACME	F-15824
2	Refrigerator 8x8 walk-in	1	ACME	R-7890VI
3	Rice cooker	1	ACME	CR-943
4	Deep fryer	1	ACME	DF-876
5	Char-Broiler	1	ACME	CB-123
6	Gas range	1	GAPP	GR-332
7	Work table	4	ACME	CW-3323
8	3-compartment dish wash sink (with 2 drainboards)	1	ACME	EQ-410C
9	Dishwasher	1	GAPP	S-3CND
10	Shelving	5	ACME	DW-1234
11	Refrigerator sandwich prep	1	GAPP	EQ-3S
12	1-compartment produce food prep sink (with drainboard)	1	ACME	S-FPMD
13	Mop sink	1	ACME	S-MOP
14	Hot water heater	1	GAPP	HW-123G
15	Ice machine	1	ACME	IM-987
16	Soda pop fountain dispenser	1	ACME	SP-5000
17	Handwash sink w/ mount	4	ACME	S-HWM
18	Handwash sink	4	ACME	S-HWM
19	Porcelain	4	ACME	PORCLEAN
20	Handwash sink	4	ACME	PORCLEAN
21	Cash register	1	POS	CR-5692
22	Coffee maker	1	GAPP	CM-3745
23	Food ventilation	1	GAPP	EG-HV500
24	Food warmer	1	ACME	EG-HV1000
25	Refrigerator 2 door beverage cooler	1	GAPP	R-2008C
26	Shelving 12 stainless steel	5	ACME	ES-61L
27	Employee storage	1	ACME	ES-61L
28	1-compartment raw meat/seafood food prep sink (with drainboard)	1	ACME	S-FPMD

- One floor plan must be submitted with the name and address of establishment, contact person and phone number.
- Each plan must be drawn to scale (no smaller than 1/4" = 1') and show in detail the following:
  - Number, type and location of all sinks and drainboards.
  - Refrigeration and cooling equipment.
  - Food preparation and service areas.
  - Employee restrooms.
  - Customer restrooms (required if you have indoor or outdoor seating).
  - Dry goods storage area (show detail of shelving area and describe type of shelving).
  - Employee storage (required).
  - Service, bus or wait areas.
- All equipment must be labeled on the floor plan and correspond to the equipment list.

**Facility Name:** AAA #1 Drive In  
**Facility Address:** 123 Main Street, Everett, WA 98201  
**Contact Person:** J. D. Public  
**Contact Phone:** (425) 339-5250

Scale 1/4" = 1'



Provide copies of your menus. Include all food and beverages you will serve. If the facility is a grocery store serving only fruits, vegetables or commercially prepackaged food, a list of goods sold may be submitted in place of the menu. Be sure to include specials and seasonal items. **Only food and beverages listed may be served. Submit copies of all breakfast, dinner, lunch, bar/lounge, happy hour, kids, catering, and online menus, fresh sheets, table tops or menu boards.** If a menu board will be used, provide photographs of the menu showing all food and beverages listed. All menu items must be readable in photographs.

A **consumer advisory** is required for all food of animal origin that is offered raw, undercooked or cooked to the customer's specification. Be sure all menu items requiring a consumer advisory are clearly identified and remind the patron that consuming these foods may result in foodborne illness.

The menu, food preparation steps, and the mode of operation may be restricted to protect public health (WAC 246-215).

**Sample Menu**

**AAA #1 Drive In**

**Breakfast**

Pancakes.....	\$2.00
Eggs*, hash browns, bacon, toast.....	\$3.00
Oatmeal.....	\$2.00

**Lunch**

Ham sandwich.....	\$3.00
Pho soup*.....	\$3.00
Rib eye steak*.....	\$10.00

**Dinner**

Prime rib*.....	\$10.00
Shrimp pasta.....	\$10.00
Deluxe cheeseburger*.....	\$10.00
Chicken salad.....	\$10.00

**Salads**

Mixed greens.....	\$3.00
Romaine.....	\$3.00
Caesar*.....	\$3.00

**Beverages**

<b>Fountain beverages</b>	
Large.....	\$3.00
Medium.....	\$2.00
Small.....	\$1.00
Coffee.....	\$1.00
Tea.....	\$1.00

\* These menu items are served raw, undercooked or cooked to your specification.  
Consuming raw or undercooked food may increase your risk of foodborne illness.

## ***Food Preparation Steps***

We want to know how food is handled from when it enters your doors to when it is served. Be sure to address the following things when completing this application item, and be advised that food preparation steps submitted without all details requested below will require a resubmittal that will extend the review process:

- 1. How food is received**
  - a. Describe whole ingredients that you purchase for your proposed menu items.
- 2. Where food will be stored prior to preparation**
  - a. Describe how and where in your kitchen the whole ingredients are stored, listing specific pieces of equipment or floor plan locations.
- 3. What equipment will be used during each preparation step**
  - a. Storing, thawing, rinsing, preparing, cooking, cooling, hot holding, reheating and service.
- 4. How the food will be stored between preparation and service**
  - a. Describe what happens once the preparation is complete, if not served immediately, ensuring that details such as equipment used are included.
- 5. How foods will be cooked**
  - a. What temperatures will you be cooking/cooling/reheating/holding foods at? Will any cooking be done unattended? Be as specific as possible.
- 6. How food will be offered for service**
  - a. I.e., hot held in a steam table, held in a prep fridge and then microwaved per order, etc.
- 7. How catered items will be held, transported, and then prepared and/or served off-site, if applicable.** *These details are only necessary for caterers or establishments who are proposing to add a catering endorsement. See Catering Questionnaire at the end of this application for more information.*

### **Some possible ways to complete this application requirement:**

1. Complete the provided graphic organizer. See form A for a complete example.
2. Provide a flow chart. See form B for a complete example.
3. Provide written descriptions for how each item is prepared addressing all the above questions. See form C for a complete example.
4. Other formats may also be accepted, but examples will not be provided.

**Any combination of food preparation steps formatting will be accepted if all of the requested details are addressed.**

Example:

**Menu Item: Chicken Salad**

Receiving	Frozen raw chicken thighs are received frozen from delivery company. Celery is received whole and unwashed. Mayonnaise is received commercially premade.
Storage	Raw chicken is stored in the freezer until ready to thaw. Raw chicken is stored in the walk-in cooler until ready to prepare. Cooked chicken is stored in the walk-in cooler until ready to be de-boned, chopped and mixed for the salad. Prepared salad is stored in the walk-in cooler or the food preparation cooler.
Thawing	Raw chicken is thawed in the walk-in cooler or under cool running water in the food preparation sink.
Rinsing	Celery is rinsed in the produce preparation sink before being cut. Raw chicken is rinsed in the meat preparation sink.
Preparing	Raw chicken is trimmed and seasoned after thawing and placed back in the walk-in cooler. Celery is cut on the drainboard of the produce preparation sink. Cooked chicken, pre-washed celery, mayonnaise, and walnuts are mixed and are then portioned into storage containers that are stored in the walk-in refrigerator until ready for service.
Cooking	Raw, trimmed, and seasoned chicken is cooked in the convection oven until it reaches a temperature of 165°F.
Cooling	Cooked chicken is removed from the convection oven and is immediately transferred to the top shelf of the walk-in cooler to cool. Chicken will cool in a shallow layer, unstacked, at a food depth of 2 inches or less. Chicken will be cooled to 41°F or lower and will be verified with a thermometer.
Reheating	N/A
Serving	Portioned chicken salad will be stored in an insert pan in the food preparation cooler for service, the date prepared will be written on the lid in sharpie and each pan sold or discarded within 7 days. When ordered, it will be scooped onto a commercially pre-made bun and served with a customer chosen side dish. <i>*For catered events we will transport portioned containers of chicken salad in a cooler with ice packs at a temperature of 41°F or lower, and then place containers in an ice bath on the buffet line immediately, discarding any leftovers at the end of the event.</i>



Name of Menu Item: \_\_\_\_\_

Receiving	
Storage	
Thawing	
Rinsing	
Preparing	
Cooking	
Cooling	
Reheating	
Serving	

*Make additional copies as needed*

## *Form B- Food Preparation Steps Flow Chart*

Example:

### ***Menu Item: Chicken Salad***

1. Frozen raw chicken thighs are received from the delivery company -->
2. frozen chicken is stored in the walk-in freezer -->
3. every morning 15 pounds of chicken are moved to the walk-in refrigerator to begin thawing -->
4. Partially thawed chicken is finished thawing under cool running water in the meat preparation sink -->
5. thawed chicken is trimmed in the meat preparation sink -->
6. trimmed chicken is seasoned and returned to the walk-in until it is ready to cook -->
7. Chicken thighs are roasted in the convection oven to a minimum temperature of 165°F -->
8. Chicken is pulled from the oven and immediately cooled on the top shelf of the walk-in cooler in a single layer (less than 2" in depth) -->
9. Celery is rinsed in the produce preparation sink -->
10. Celery is then chopped on the produce preparation sink drainboard and is transferred to the walk-in cooler in a sealed container -->
11. Chicken is checked with a thermometer to make sure it has cooled fully to 41°F or lower -->
12. chicken is transferred to the food preparation table and is deboned and roughly chopped -->
13. Chopped chicken is mixed with mayonnaise, pre-washed celery and chopped walnuts until well mixed -->
14. Chicken salad mixture is transferred back to the walk-in cooler at 2" food depth until it has fully cooled back to 41°F -->
15. Portioned chicken salad is stored in the food preparation cooler until service, each pan is covered in plastic wrap with the date written on it in sharpie and discarded after 7 days.
16. *For catered events we will transport portioned containers of chicken salad in a cooler with ice packs at a temperature of 41°F or lower -->*
17. *At the event hall, containers will be placed in an ice bath on the buffet line immediately and monitor temperatures hourly to ensure they remain 41°F or lower -->*
18. *Any chicken salad or leftovers found above 41°F will be discarded.*

Examples:

**BBQ beef/pork** – beef and pork are delivered frozen and stored in the walk-in refrigerator to thaw. After the beef and pork are thawed, they are marinated in a commercially prepared marinade in the walk-in refrigerator overnight. Meats are then cooked on the smoker first thing in the morning for 8 hours until they reach an internal temperature of 155°F. After smoking, the beef and pork are shredded and mixed with our BBQ sauce and cooled in hotel pans at 2" food depth in the walk-in refrigerator. After meats are cooled to 41°F (takes no longer than 6 hours), they are covered with plastic wrap with the date written on each. Meats are reheated in the convection oven to 165°F as needed and kept in the front area steam table until served. Any pans that aren't cooked and served are discarded after 7 days. *For catered events we will transport the reheated meat at a temperature of 135°F or higher in hotel pans inside of a sealed Cambro and placed on a preheated steam table immediately once at the event space.* Leftover items are cooled uncovered in the walk-in refrigerator at 2" food depth. *Any leftovers at catering events will be discarded.*

**All hamburgers** – patties are purchased frozen. Frozen patties are cooked to order on the flat top grill to 158 degrees unless otherwise specified by the customer and served immediately. *For catered events, we will transport frozen burger patties to the event in an ice chest at 41°F or below. We will also bring our gas propane grill with a lid and grill the burgers at the customer's request as part of the buffet line, keeping the burger patties in a refrigerator on-site. Burgers will be cooked to order at catered events, a consumer advisory sign will be taped to the burger station.*

**Pho soup** – beef bones are delivered and stored in the walk-in refrigerator. The beef bones are placed into a large stockpot, and water is added using the faucet by the stove. Vegetables are washed in the vegetable preparation sink, cut, and portioned. The bones and water are brought to a boil and vegetables and spices are added. The soup boils for 8 hours on the stove to fully cook. Cooking will occur during business hours and under constant supervision. After soup is cooked half of the broth is held hot on the range at above 135°F until we close and then it is discarded. The remainder is cooled to 41°F immediately after cooking using an ice bath in the vegetable prep sink and an ice wand. We monitor the temperature hourly to ensure it cools to 70°F in the first 2 hours and add more ice as needed. Once it reaches 41°F, we transfer it to a clean 5-gallon bucket and store it in the walk-in cooler and write the dates on each bucket. The remaining pho soup is reheated to over 165°F on the stove the next day before use. Any pho soup not used within 7 days is frozen.

**Ham/turkey/roast beef sandwiches** – ham, turkey and roast beef are purchased pre-cooked. Cheeses are received commercially prepared and pre-sliced. Meat is sliced daily on the deli slicer, portioned, container date-marked, and placed in the preparation refrigerator to hold at or below 41°F. All fruits and vegetables are rinsed each morning in the food preparation sink and stored in the preparation refrigerator. Sandwiches are made to order and served cold or heated on panini grill. Any containers of cut meat and cheese not used within 7 days is thrown away. *For catered events, all cut and washed vegetables, meats and cheeses will be arranged on platters and covered, then placed in a sealed Cambro on ice sheets for transport. At the event, platters will be placed in a commercial refrigerator onsite until they are placed on the buffet line for immediate service. Leftovers will be discarded.*