



**DAVIDSON COUNTY**  
**HEALTH DEPARTMENT**  
 Protecting, Caring, Serving Our County

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**Davidson County Health Department**  
**Food, Lodging and Institutional Plan Review Application**

**Applications must be filled out completely or plans will not be processed.**

**Is this facility applying for:**

- **A new permit:**  **Yes**    **No**; or
- **A transitional permit:**  **Yes**    **No**

\*\*A transitional permit may be issued when a food service facility is sold from one owner to another.

Name of the proposed facility: \_\_\_\_\_.

Address of the proposed facility: \_\_\_\_\_

\_\_\_\_\_.

Contact person name: \_\_\_\_\_ Phone number (H) \_\_\_\_\_

Contact person address: \_\_\_\_\_ (C) \_\_\_\_\_

Name of facility operator: \_\_\_\_\_ Phone number (H) \_\_\_\_\_

Facility operator address: \_\_\_\_\_ (C) \_\_\_\_\_

\_\_\_\_\_.

**Lodging Facility:**     Hotel/Motel (offer overnight lodging only).

Bed & Breakfast

\*\*Will the hotel/motel or bed & breakfast facility offer food service?    **Yes**    **No**

**Institution Facility:**   \*Child Care Facility \_\_\_\_\_ (\*Highly susceptible population)

**Food Service:**    Restaurant:    **Yes**    **No** (restaurants have seating).

Food stand:    **Yes**    **No** (food stands do not have seating).

Meat markets:  **Yes**    **No** (meat markets cut meat & poultry).

Other explain: \_\_\_\_\_

\_\_\_\_\_.

The plans submitted for new/remodeled facility plan review shall contain the following:

**\*\*A Plan review fee of \$250.00 shall be made payable to the Davidson County Health Department upon plan submittal. A permit applicant shall submit prepared plans and specifications for review and approval before the construction of a food establishment or the conversion/remodeling/ or change of type of an existing structure for use as a food establishment.**

A plan drawn to scale (1/4 inches = 1 foot) showing the location of equipment, an equipment list, plumbing lines including floor drains and floor sinks, electric service and location of electric panels, mechanical ventilation (exhaust hood and make up air), can wash, and important outside equipment such as dumpster and grease containers. The plans shall be on paper of a minimum size of 11 inches X 14 inches in size. The plans shall include the finish schedule for floors, walls, and ceilings. As stated above, the layout of the floor plan shall be accurately drawn to a minimum scale of ¼ inches = 1 foot. The plans shall also provide a proposed menu.

**Projected Start Date of Construction/Remodel:** \_\_\_\_\_

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**Food Operation Information:**

\*\*A complete menu or proposed list of food and beverages to be offered (including seasonal, catering and banquet menus) are required.

**Hours of Operation:**

Sun \_\_\_\_\_ Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_

Types/ maximum meals that will be served: (breakfast) \_\_\_\_\_ (lunch) \_\_\_\_\_ (dinner) \_\_\_\_\_.

Number of seats (indoor)/ (outdoor): \_\_\_\_\_ Square feet of facility: \_\_\_\_\_.

Number of employees (Max per shift): \_\_\_\_\_ Number of shifts: \_\_\_\_\_.

**Type of Service (check all that apply):**

- Dine-in meals
- Carryout meals
- other: \_\_\_\_\_
- Catering
- Buffet/self-service

**Food Delivery** (daily, weekly, other): (Food must be delivered refrigerated at 41 F or below or frozen)

Frozen foods: \_\_\_\_\_

Refrigerated foods: \_\_\_\_\_

Dry foods / supplies: \_\_\_\_\_

All food sources and supplies shall be obtained from an inspected and approved source. Please list food suppliers: \_\_\_\_\_

\_\_\_\_\_.

**Customer utensils:** (check what applies)

Single-use (disposable):  Plates  Glassware  utensils

Multi-use Utensils (reusable):  Plates  Glassware  utensils

### **Food Storage Space**

#### **Cold Holding:**

Refrigerators & freezers hold food cold. There must be enough refrigeration space to maintain food temperatures at the required refrigerated temperature of 41 F and adequate freezer space (0 to 10 F). These refrigeration and freezer units shall include walk-in units, reach-in units (designed for storage needs) as well as units that you will work directly out of such as waist high work top units and flip top preparation units.

Number of reach-in refrigerators \_\_\_\_\_

Number of walk-in refrigerators \_\_\_\_\_

Number of reach-in freezers \_\_\_\_\_

Number of walk-in freezers \_\_\_\_\_

- Provide the total amount of space given for walk-in storage units: Freezer \_\_\_\_\_ sq. ft. and Refrigerator \_\_\_\_\_ sq. ft.
- Provide the total amount of space given for reach-in storage units: Freezer \_\_\_\_\_ sq. ft. and Refrigerator \_\_\_\_\_ sq. ft.
- Provide the total amount of space given for units that you will work directly from:  
Freezer \_\_\_\_\_ sq. ft. and Refrigerator \_\_\_\_\_ sq. ft.

**Dry Storage**

Location used for dry storage: \_\_\_\_\_  
\_\_\_\_\_.

Space allocated for dry storage (shelving space, square footage of area (length x width), number of meals between deliveries, etc): \_\_\_\_\_  
\_\_\_\_\_.

**Hot holding**

How will the potentially hazardous foods prepared and cooked in your facility be held hot at the required temperature of 135 F or above during service or while waiting to be served? Please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**Cooling**

Cooked and hot held foods that have been cooked to a high temperature or foods that have been cooked and then held hot at 135 F or above are difficult to properly cool, including foods such as chili, gravies, re-fried beans and rice, large pieces of meat, thick stews and soups, etc.

When food(s) in large amounts or deep containers are placed in the refrigerator, the center portions cool very slowly because of the insulating effect of the food itself. Cooling food with ice baths & frequent stirring, using ice as an ingredient, placing food in shallow containers not more than 4 inches in thickness, & separating into small or thinner portions are some of the measures that can be taken to promote rapid cooling. Indicate the method of how cooked or hot held food(s) will be cooled from 135F to 70F or below within 2 hours or less; and within a total of 6 hours from 135 F to 41F or less.

\*If "other method" is checked, indicate the type of food(s) to be cooled and hoe they will b cooled.

<b>Cooling Process</b>	<b>Meat</b>	<b>Seafood</b>	<b>Poultry</b>	<b>Other</b>
Shallow pans				
Ice bath				
Rapid Chill				
Stirring w/ ice paddle				
Other				

\*Other \_\_\_\_\_  
\_\_\_\_\_

**Thawing**

Indicate by checking the appropriate boxes how food in each category will be thawed.

\*If "other" is checked, indicate the type of food(s): \_\_\_\_\_  
\_\_\_\_\_.

Thawing Process	Meat	Seafood	Poultry	Other
Refrigeration (41F or lower)				
Submerged Running water (less than 70F)				
Cooked from a frozen form				
Microwave, if immediately cooked				

Other methods/ explain your process: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**Reheating**

How will the foods that have been cooked, (properly) cooled and held in the refrigerator be re-heated to the required internal temperature of 165 F, **within 2 hours**, before being served again? What pieces of equipment will be used to re-heat food(s). Steam tables or hot holding equipment are not designed to reheat food. Remember, re-heating, even large portions of food must be completed within 2 hours.

Please explain, including equipment to be used:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

### Food Handling Procedures

- Will raw meat or pork require cutting into smaller portions, thawing, washing, rinsing, etc. prior to cooking?  **Yes**  **No**
- Will raw poultry require cutting into smaller portions, skewering, thawing, washing, rinsing, etc. prior to cooking?  **Yes**  **No**
- Will raw seafood or fish require scaling, cutting into smaller portions or pieces, thawing, washing, rinsing, etc. prior to cooking?  **Yes**  **No**
- Will raw vegetables require cutting into smaller pieces, thawing, washing, rinsing, etc. prior to cooking?  **Yes**  **No**

### Cooking Processes

Potentially hazardous foods requiring cooking shall be cooked to heat all parts of the food to a temperature of at least 135 F except as follows:

- Poultry, poultry stuffings, stuffed meats, and stuffings containing meat shall be cooked to heat all parts of the food to at least 165 F with no interruption of the cooking process.
  - Pork and any food containing pork shall be cooked to heat all parts of the food to at least 145 F.
  - Ground beef and foods containing ground beef shall be cooked to an internal temperature of at least 155 F.
  - Roast beef shall be cooked to an internal temperature of at least 135 F.
  - Beef steak shall be cooked to temperature of 145 F unless otherwise ordered by the consumer for immediate service.
- Will the facility be serving foods undercooked? (hamburgers, steaks, eggs, etc.):  
 **Yes\***  **No**

\*\*If yes, A consumer Advisory will need to be posted on all menus (brochures, placards and boards) stating:

**\*These items may be cooked to the customer's order. Consuming raw or undercooked meats, poultry, seafood, shellfish, or eggs may increase your risk of foodborne illness, especially if you have certain medical conditions.**

(Note: Items on menu that will be undercooked must be asterisked (\*) to notate these items can be undercooked or may contain a raw or undercooked ingredient).

**Specialized Processes** (Mark all that apply)

- Curing
- Live Molluscan Shellfish
- Other
- Sprouting
- Smoking
- Acidification (sushi, etc)
- Custom Processing
- Reduced Oxygen Packaging (ex: Vacuum packaging, sous vide, cook-chill, etc).

Specialized Processes (continued):

**Explain Checked Processes:** (Must provide a HACCP plan for identified specialized processing methods)

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**Physical Facilities**

Facilities will be required to have a 3-compartment sink in order to wash, rinse, and sanitize the utensils. The sink wells must be large enough to submerge wash, rinse, and sanitize your largest piece of equipment. This sink must have drainboards on each end of the sink and these drainboards shall be at least 24 inches in length.

A facility with 50 seats or more should also have a mechanical dish machine including a pre-wash station with spray head, due to the increased volume of meals and the number of utensils that need washing.

<b>Handwashing Facilities</b>	<ul style="list-style-type: none"><li>• Number of handwashing sinks in facility _____.</li><li>• Locations: (food prep, warewashing, work line, etc): _____ _____ _____ _____.</li></ul>
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<p><b>Food Prep Sinks</b> (There may have to be more than one. Numbers will be based on volume of food prepared)</p>	<ul style="list-style-type: none"> <li>• Number of food preparation sinks in facility: _____.</li> <li>• Types of foods: vegetables, fruits and raw meats that require washing, cutting, etc.:</li> </ul> <hr/> <hr/> <hr/> <hr/>
<p><b>Warewashing Facilities</b></p>	<p><b><u>MANUAL DISHWASHING</u></b></p> <ul style="list-style-type: none"> <li>• 3 compartment sink:    <input type="checkbox"/> <b>Yes</b></li> </ul> <p>Identify the length, width and depth of the 3 compartments:</p> <p>_____.</p> <ul style="list-style-type: none"> <li>• Pre-wash station with spray head?    <input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b></li> <li>• Describe size, location and type (drainboard length _____, wall-mounted or overhead shelves, stationary or portable racks) of air-drying space.</li> </ul> <p>_____</p> <hr/> <ul style="list-style-type: none"> <li>• What type of sanitizer will be used? <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Chemical type</b> _____.</li> <li><input type="checkbox"/> <b>Hot water</b></li> </ul> </li> </ul> <p><b><u>MECHANICAL DISHWASHING</u></b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>Chemical</b></li> <li><input type="checkbox"/> <b>Hot water</b></li> </ul> <ul style="list-style-type: none"> <li>• Will ventilation be provided?    <input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b></li> <li>• Pre-wash area with spray head installed?    <input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b></li> <li>• Adequate air-drying space provided?    <input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b></li> </ul>



<p><b>Water Supply</b></p>	<ul style="list-style-type: none"> <li>• Is the water supply:    <input type="checkbox"/> <b>Public</b>    <input type="checkbox"/> <b>Private (well)</b></li> <li>• If private, has source been approved?    <input type="checkbox"/> <b>Yes*</b>    <input type="checkbox"/> <b>No</b>  ** Attach copy of written approval and/or permit.</li> <li>• Is there an ice machine on premises?    <input type="checkbox"/> <b>Yes</b>    <input type="checkbox"/> <b>No</b></li> </ul>
<p><b>Water Heater</b></p>	<p><b><u>Tank type</u></b></p> <ul style="list-style-type: none"> <li>• Manufacturer and model: _____</li> <li>• Storage Capacity: _____ gallons.</li> <li>• Input Rating  Electric: _____ kilowatts (kW)  Gas: _____ BTU's.</li> </ul> <p><b><u>Tank-less</u></b></p> <ul style="list-style-type: none"> <li>• Manufacturer and model: _____</li> <li>• Number of tank-less heaters: _____</li> <li>• Input rating: _____ BTU's</li> </ul>
<p><b>Sewage Disposal</b></p>	<ul style="list-style-type: none"> <li>• Is the sewage system:  <input type="checkbox"/> <b>Municipal (sewer)</b> or <input type="checkbox"/> <b>Private (septic)</b></li> <li>• If private, has the sewage system been approved?  <input type="checkbox"/> <b>Yes*</b>    <input type="checkbox"/> <b>No</b>  **Attach copy of written approval and/or permit.</li> <li>• Will grease traps/interceptors be provided?  <input type="checkbox"/> <b>Yes*</b>    <input type="checkbox"/> <b>No</b>  **Identify location on plan.</li> </ul>

<p><b>Refuse, Recyclables, and Returnables</b></p>	<ul style="list-style-type: none"> <li>• Will a dumpster be used:    <input type="checkbox"/> <b>Yes</b>   <input type="checkbox"/> <b>No</b></li> <li>• Will dumpster be cleaned by contract cleaning service offsite?  <input type="checkbox"/> <b>Yes</b>   <input type="checkbox"/> <b>No*</b></li> </ul> <p>**If no, then hot and cold water will have to be supplied to the dumpster pad, the pad will have to be curbed and sloped to drain wash water. The drain must be plumbed into the grease trap.</p>
<p><b>Service Sink/Can Wash</b></p>	<ul style="list-style-type: none"> <li>• At least one service sink or curbed cleaning facility (min. 3'x3') equipped with a floor drain shall be provided and conveniently located for the cleaning of mops, disposal of mop water, cleaning of trash cans, etc. Type of facility and location:  _____.</li> </ul>
<p><b>Toilet Facilities/ Linens</b></p>	<ul style="list-style-type: none"> <li>• Toilet facilities are shared for employees and customers?  <input type="checkbox"/> <b>Yes</b>   <input type="checkbox"/> <b>No</b></li> <li>• Will linens be laundered on site?   <input type="checkbox"/> <b>Yes</b>   <input type="checkbox"/> <b>No</b></li> </ul> <p>Linen cleaning service: _____.</p>
<p><b>Chemicals/ Toxic material Storage</b></p> <p><b>Staff lockers/ Storage</b></p>	<ul style="list-style-type: none"> <li>• Where will chemicals be stored in the facility? _____  _____.</li> <li>• Where will employees and staff store their personal items?  _____  _____.</li> </ul>

**Finish Schedule**

Indicate the surface finish of floors, walls, and ceilings (quarry or vinyl tile, FRP board (fiberglass reinforced panels), sheetrock & paint, vinyl or acoustic tile, etc.

<b>Area</b>	<b>Floor</b>	<b>Base</b>	<b>Walls</b>	<b>Ceilings</b>
<b>Kitchen</b>				
<b>Warewashing</b>				
<b>Walk- in Refrigerator</b>				
<b>Walk-in Freezer</b>				
<b>Dry Storage</b>				
<b>Toilet rooms</b>				
<b>Bar</b>				
<b>Other</b>				

I certify that the information in this application is correct, and I understand that any deviation without prior approval from this Health Regulatory office may nullify plan approval.

Signature: \_\_\_\_\_  
(Owner or Responsible Representative)