



County of Yolo

COMMUNITY SERVICES DEPARTMENT

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Environmental Health Division Manager

Environmental Health
292 W. Beamer Street, Woodland, CA 95695
PHONE - (530) 666-8646 FAX - (530) 669-1448

Food Facility Plan Review Application

Name of Business: _____ Phone: _____
 Address of Business: _____
 Owner Name: _____ Phone: _____
 Owner Address: _____
 Architect: _____ Phone: _____
 Contact for Plans: Name _____ Phone: _____
 Address _____ Email: _____

Scope of Work: _____

- Minor Equipment Replacement
- Remodel of Existing Facility
- Food Establishment without Kitchen or Exhaust Hood
- Food Establishment with Kitchen, Exhaust Hood, Food Service Area
- Food Establishment with Multiple Kitchens, Food Service Areas

Brief Description of Operation: _____

- Full Food or Beverage Preparation
- Multi-Use Eating/Drinking Utensils
- Prepackaged Food & Beverage Only
- Prepackaged w/ Limited Open Food & Beverage
- Single Service Eating/Drinking Utensils
- Produce Only

Facility Seating Capacity: _____ Square Footage: _____

Water Source: City connection Water supply well Assigned Building Permit #: _____

Wastewater Treatment: City sewer Onsite septic system

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- ✓ One set of plans is required.
 - ✓ All plans must be drawn to scale (minimum of 1/4 inch per foot).
 - ✓ Equipment specification sheets and menu must be included with submittal.
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Fees: Food facility plan checking fees are based on the type of work being done to the facility. For our current fees please contact us at (530) 666-8646.

Expedited plan check services are available for an addition 50% of the applicable plan check fee.

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FOR OFFICE USE ONLY			
Fee Paid			FA#
Check Number	Cash	Credit	SR#
Receipt Number			PE#

The items below are required to be included in the plans. Review the checklist and mark off each item that is or is not included at this time.

Yes	No	Requirements
		Minimum one complete set of plans: ¼ inch/foot scale. Paper and electronic.
		Vicinity map. Site plan showing outside refuse storage area
		Floor plan showing equipment layout
		Plumbing plan showing hot and cold water; waste lines from fixtures, water heater location (gallons, BTU's or kW's), floor sinks and/or floor drains, liquid disposal
		Electrical plan including lighting
		Interior room finish schedule including walls, floors, base and ceiling. Show type of material, surface finish and color; material samples or brand names provided
		Manufacturer's brochures (cut sheets) of all equipment including counters, cabinets, and water heater showing that all equipment is NSF approved or equivalent. Detailed elevation drawings specifying make and model.
		Kitchen exhaust ventilation plans including make-up air. Provide drawings, calculations, and details
		Hand sinks in the kitchen and restrooms shown with soap and towel dispensers
		Approved janitorial service sink or area; faucet with hot and cold water; vacuum breaker
		3 compartment sink and other utensil washing facilities
		Food preparation sink with indirect waste drain to floor sink
		Restrooms
		Clothing change room or storage facilities such as lockers
		Storage area (food): 25% of food preparation area or a minimum of 100 square feet
		Storage for chemical or toxic cleaners; janitorial storage
		Garbage containers
		Linen storage (clean and dirty)
		Refrigerator/freezer
		Proposed Menu

It is understood that the plan review process cannot be started until all information above is submitted and complete. **Incomplete plans will be considered rejected until all information is received.** Plans will be approved or rejected within 20 working days. If plans are rejected the 20 working days begins again at the time of resubmittal.

Printed Name: _____ Signature: _____

Title: _____ Date: _____