



For office use only

Date Submitted: _____ Date Add'l info requested: _____ Date Reviewed: _____

Food Establishment Plan Review Application

All new or extensively remodeled food establishments in Eau Claire County must submit plans, equipment specifications and a menu for new structures or major remodeling of present structures of restaurants, beverage establishments, and retail food. These items must be submitted and approved by the Health Department in advance of construction. Plan review fees will be assessed. If operators are found to have built new or extensively remodeled without a plan review submission and approval, then they shall be subject to a plan review fee, as well as, a penalty fee equal to that of the plan review fee.

When ownership changes in a current establishment, a plan review packet must be submitted in order to verify that the current establishment meets the updated 2009 Wisconsin Food Code.

The Department will notify the Establishment's Local Contact* within 10 business days of submittal if the plans are incomplete and cannot be reviewed. The department will review applications within 20 business days from notification that the application is complete. It is strongly encouraged that establishments schedule a pre-plan review meeting by calling 715-839-5092 prior to submittal.

This plan review is for:

- New construction
- Remodel
- Change of ownership

Food Establishment located in:

- City of Eau Claire
- Eau Claire County

Establishment Information:

License holder: _____

Circle one INC /LLC/Sole proprietor

Business mailing address: _____

DBA Establishment name: _____

Establishment address: _____

Phone: ___ - ___ - _____ E-Mail: _____

*Local contact: _____ Phone: ___ - ___ - _____

Name of operator: _____

Address of operator: _____

Phone: ___ - ___ - _____ E-Mail: _____

Name of contractor: _____

Address of contractor: _____

Phone: ___ - ___ - _____ E-Mail: _____

Name of Previously Licensed Location/Business (if applicable):

Check which meals will be served:

- Breakfast Lunch Dinner

Check all type of services provided:

- Catering Take Out Wholesaling Bakery/Baking
 Buffet Delivery Meat Market Sit Down Meals
 Grocery Fish Market Bulk Food Sales Bar

Will the following highly susceptible populations be served or catered?

- Nursing Home Assisted Living Child Care Schools
 Health Care Other: _____

Has an owner, manager, or employee taken a food safety class and become a WI Certified Food Manager? Yes No

If yes, please list the certified individual: _____

Information on WI Certified Food Managers can be found in the “Food Establishment Plan Review Guidelines”.

Waste and water supply:

- Municipal water Municipal waste Well Septic system

Grease trap located: _____

Size/gallon capacity: _____

Not applicable because: _____

Solid waste containers located: _____

Garbage company: _____

Be advised that bulk solid waste containers must be:

- Located outdoors on hard paved and sloped surfaces
- In an enclosed area
- With separated recyclables

All well and septic questions will be directed to the Well and Septic Specialist at the Eau Claire City-County Health Department. City of Eau Claire plumbing questions will be directed to the City Plumbing Inspector. *See the “Food Establishment Plan Review Guidelines” for more information.*

Menu

Submit the Proposed Menu for the Food Establishment and answer the following:

Special Processes:

Check any special processes to be conducted at the establishment:

- Curing Smoking Drying Sous Vide
 Sushi Wholesale R.O.P Canning
 Lacto-fermentation e.g. Kombucha Other: _____

Note: These processes may require a variance and/or HACCP Plan, and licensing by the WI Department of Agriculture.

Consumer advisory: (Consumer advisory is required for raw or lightly cooked items. EX: eggs, burgers)

Will any menu items require a consumer advisory?

- Yes No

If yes, then provide a sample of how it will be displayed to inform and advise the public.

See "Food Establishment Plan Review Guidelines" for examples.

Food source:

List food sources/suppliers: _____

What raw meats, poultry, and seafood will be used? How will they be stored separately from ready to eat foods? _____

- Ice source:** No ice Ice machine Purchase Ice

Food Processing Procedures

Cooling potentially hazardous foods: List all foods that will be cooled using each of the following methods. Foods must be cooled from 135°F to 70°F within 2 hours and within a total of 6 hours from 135°F to 41°F or less.

- Uncovered shallow pans in refrigerator: _____
- Ice baths: _____
- Ice paddles: _____
- Other: _____

Thawing

List foods that will be thawed using the following methods:

- Refrigeration: _____
- Under running water in food prep sink: _____
- Microwave as part of cooking process: _____
- Cook from frozen: _____

Reheating:

List foods and equipment used to reheat foods rapidly at 165° F.

Ready to Eat Food Preparation

Will produce come pre-washed or will it be washed at the establishment?

- Onsite Comes pre-washed

Where will produce be washed? _____

When ready-to-eat foods are being prepared how will bare hand contact be avoided?

- Disposable gloves Deli tissue Tongs/utensils Other: _____

If potentially hazardous ready-to-eat foods are prepped and held longer than 24 hours how will it be date marked?

Thermometers:

To verify cooking, cooling, storage, and hot hold temperatures, what type of thermometer will be used?

How will it be cleaned? _____

Wiping cloths:

Describe method and sanitizer used: _____

Food displays/buffet/bulk foods

List foods on display and how they will be protected:

Facility Floor Plan

Submit a floor plan drawn to scale.

Include:

1. All equipment used in food storage and preparation
2. All sinks:
 - a. Hand sink(s) and lavatories
 - b. Vegetable and food prep sinks
 - c. Utility/mop sinks
 - d. Warewash sinks
 - e. Other: _____
3. Dish machine/glass washer
4. Wait station(s)
5. Toilet facilities
6. Dry/food storage areas
7. Employee break area and personal item storage
8. Chemical storage area
9. Laundry facilities
10. Water heater location
11. Bar area
12. Indoor/outdoor Seating Areas
13. Outdoor cooking/bar (if provided)
14. Recycling and garbage area-location of grease receptacle
15. Location of all floor sinks and floor drains
16. Grease Interceptor/grease trap
17. Ice bins and Ice machine
18. Dipper wells
19. Chemical dispensing units
20. Exhaust hoods
21. Buffet/customer service area
22. Building site layout including adjacent businesses and outdoor storage areas
23. Other : (please List and show on plans)

Be advised that the following specialized equipment may drive the requirement for product sampling by the ECCCHD staff and/or laboratory:

- Milk Dispensers
- Soft serve machine
- Soda & Iced tea dispensers
- Ice maker
- Vending machines

Hoods:

Make/Model (provide specification sheet) _____ Dimensions _____

ANSUL system: Yes No

Cleaned By: _____

Water Heater:

Make/Model (Provide specification sheet) _____

Proposed size: Electric _____ KW Gas _____ BTU's

Storage tank capacity _____ gallons

Hot water heater second hour recovery rate _____ gallons/hour at a 100o F rise

Plumbing

Utensil washing:

Commercial dishwasher Make/Model (Provide specification sheet): _____

High temp Low temp

Located:

Above counter Under counter

If above counter used is a Type II hood installed?

Yes No

Does all equipment fit into dish washer?

Yes No

Utensil Wash Sinks:

Three compartment Four compartment Other _____

Handwashing:

Handwash sinks shall be located in areas where food is handled. Please check the areas provided in your restaurant below:

- Food prep
- Customer service
- Wait stations
- Utensil wash
- Bar
- Temporary bar and food service
- Grill line
- Beverage carts

Handwash sinks are required to be supplied with:

- Hands free faucets (Provide specification sheet)
- Soap
- Single use paper towel
- Signage

Back flow prevention and air gaps:

List type of devices used:

	Example	
Food prep sinks	Air gap	
Hose bibs	ASSE 1011 Vacuum breaker	
Chemical dispensers	Direct connect ASSE 1055 listed dispenser	
Soda dispensers CO ₂ system	ASSE 1022 Dual check valve	
Ice machine/bins	Air gap	
Other:		

Facility Details/Finishes

Linens:

How will wiping cloths, aprons and other linens will be cleaned?

- Onsite washer Make: _____ Model: _____
- Onsite dryer Contract service Other: _____
- How will soiled and clean linens be stored? _____

Chemicals:

Bulk Storage Location: _____

Sanitizer used: _____

- Chlorine Quaternary Ammonia Iodine

Test Strips provided:

- Chlorine test strips Quaternary Ammonia test strips Iodine test strips

Pest Control:

Service Provided: Yes No

If Yes, list company name: _____

Employee Personal Item Storage:

How and where will employee personal items be stored? _____

Lighting:

Please be advised that all lighting in equipment and above food storage and prep areas must be shielded. The following intensities shall be provided; 540 lux (50 foot candles) in food prep areas, 108 lux (10 foot candles) in walk in coolers & dry storage and 220 lux (20 foot candles) in all other kitchen areas.

Finishes:

All finishes in food storage and preparation areas must be smooth, durable and easily cleanable. List below and be able to provide samples if requested.

	Example	Kitchen	Wait stations	Walk in	Dry storage	Custodial closets
Floors	Quarry tile					
Walls	FRP					
Coving	Vinyl base cove					
Ceilings	Smooth panel					
Shelving	Metro racks					

Standard Operating Procedures

The following items must be discussed prior to opening:

1. Employee Health Policy. What training or means will be provided to inform employees of their responsibility to report illnesses, review foodborne illness symptoms, and report any diagnosed illness? _____
 2. A Person In Charge (PIC) must be present at all times. This person does not have to be certified, but must know food safety principles and be able to take action if needed.
(See the “Food Establishment Plan Review Guidelines” for further details.)
 3. Allergen Awareness
 4. Employee training: How will employees be instructed on food safety principles?
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Contact Information:

This application, a set of plans, and a menu may be mailed to:

Eau Claire City-County Health Department
720 Second Ave
Eau Claire, WI 54703

If you have any questions about this application or need to schedule a preplan review appointment call:

Eau Claire City-County Health Department
Environmental Health Section
Plan reviewer: 715-839-5092
General questions: 715-839-4718 Ext. 0