

COMMUNITY DEVELOPMENT AGENCY

ENVIRONMENTAL HEALTH SERVICES DIVISION

PLAN SUBMISSION CHECKLIST

This checklist is required for all application types.

EHS Food Plan Reviewers will use this checklist *side-by-side* the plans as they review your project. It is to your benefit to provide accurate information and to complete all sections. Be sure to *correctly enter the page number* as the reviewers will not search your plans to find the required information.

On the lines in the left column, *identify the page numbers of the plan sheets* where the appropriate issues are addressed on the plans or write "Yes" or "N/A" if items do not pertain to your scope of work.

The following items are listed in detail on the checklist and are ALWAYS required for every submittal:

- ✓ One set of plans
- ✓ Food and drink menu
- ✓ Spec sheets for all existing AND new equipment
- ✓ Letter from the Sanitary District or approval from EHS Land use if on septic system

IF ANY OF THE INFORMATION BELOW IS INCOMPLETE, THE PLANS WILL NOT BE ACCEPTED FOR REVIEW

General	
REQUIRED. Mark with 'Yes'	Submit a copy of the food and drink menu.
Mark 'Yes' or N/A	Submit a Specialized Processing Questionnaire if the menu includes use of vacuum packaging (e.g. reduced oxygen packaging, vacuum packaging, canning, sous vide, smoking, acidification, bottling juices, seed sprouting, etc.).
Mark 'Yes' or N/A	Submit a Standard Operating Procedure for Rapid Cooling if food will be cooked and then chilled.
Mark 'Yes' or N/A	Submit a copy of menu showing calories per food item if facility is part of a chain of 20 or more locations.
REQUIRED. mark with 'Yes'	Initially provide one (1) complete set of plans (accurate, clear, drawn to scale, ¼" per 1' required, and must be designated for construction only). Plan size - 24" x 36" ONLY.
REQUIRED. Indicate page #	Identify the scope of work of the project.
REQUIRED. Indicate page #	A detailed site plan is required. This plan must show the cross streets and the layout of the center. Include the north arrow.
REQUIRED. Indicate page #	Include an existing and proposed floor plan.
REQUIRED. Indicate page #	Clearly designate/describe all areas, including:
	• Kitchen
	• Storerooms
	• Bars
	• Wait-stations
	• Customer self-serve stations
	Garbage/refuse storage
	Utensil washing
	• Display floors
	Employee locker area
	Chemical storage/janitorial
	• Offices
	Seating (indoor and outdoor)
	Include all interior and exterior doors and windows. Include the total square footage of the facility and the seating capacity.

REQUIRED. Mark with 'Yes' Include a letter from the Sanitary District which details the size of the grease trap/interceptor of an exemption letter from this requirement for plans that include any plumbing work. PLANS WILL NOT BE ACCEPTED WITHOUT THIS LETTER.	r
PLANS WILL NOT BE ACCEPTED WITHOUT THIS LETTER.	
Check N/A only if connected to septic system)	
Mark 'Yes' or N/A If your business is connected to a septic system a grease trap sizing must be completed by an	
engineer and submitted to Environmental Health Land Use for review.	
Provide approval letter or email from Environmental Health Land Use for the required grease trap/interceptor if on a sewage disposal system. (Check N/A only if connected to sanitary sewe	r.)
REQUIRED. Mark with 'Yes' The grease trap/interceptor must be accessible for inspection and cleaning. Note: It shall not be located in a food handling area unless flush with the floor.	2
Indicate page # OR 'N/A' Include manufacturer and model number on the plumbing schedule, show location of grease trap/interceptor, and show grease waste lines with directional arrows.	
Indicate page # OR 'N/A' Provide manufacturer's specification sheet for the proposed grease trap/interceptor.	
Finishes	
REQUIRED. Indicate page # Room Finish Schedule: The room finish schedule should indicate the floor, wall and ceiling	
finishes and materials described for each area, including walk-in units and restrooms. Identify	
wall textures, finish of all painted surfaces and radius of base cove. Label the exact material or	ì
the schedule and cross-key with each material sample provided. See <u>Approved Flooring</u> <u>Materials and Approved Wall and Ceiling Materials.</u>	
REQUIRED. Mark with 'Yes' A material sample will ALWAYS be required for the:	
~ acoustical ceiling material	
~ epoxy flooring ~ wood flooring	
~ sheet vinyl flooring	
No photos will be accepted for the above items. For other proposed* materials including existing finishes, samples will not be required for plan	
check applications as long as the submission includes color photos correctly depicting the colors	
proposed for all areas (including restrooms and janitorial closets, and existing finishes) except dining.	
Please ensure any photo(s) of the proposed materials are clearly labeled using the same reference	
included in the room finish schedule (i.e., PT-01, QT, 01, etc.) and the photo states the location(s)	
where material will be used.	
*NOTE OF EXCEPTION: If any material is proposed to be used that is NOT ON THE APPROVE	ZD
REQUIRED. Indicate page # Provide detail on plans showing an integral cove base with 3/8" radius	
REQUIRED. Indicate page # Provide detail on plans showing an integral cove base with 3/8" radius. REQUIRED. Mark with 'Yes' Are all finishes, smooth, durable, non-absorbent and easily cleanable? This applies to all	
finishes, excluding the dining area.	
Equipment	
REQUIRED. Mark with 'Yes' Provide cut sheets/manufacturer specification sheets for all (including existing) equipment	
showing conformance with applicable ANSI standards. Be sure to number the cut-sheets	
/manufacturer specification sheets to correspond with equipment numbers designated on plans REQUIRED. Mark with 'Yes' For custom equipment, provide sufficient details to determine ANSI/NSE equivalency. Provide	
REQUIRED. Mark with 'Yes' OR 'N/A' For custom equipment, provide sufficient details to determine ANSI/NSF equivalency. Provid shop drawings from an ANSI certified manufacturer.	e
REQUIRED. Indicate page # Provide an equipment layout to include:	
• Clearly numbered equipment list that is cross-keyed with the equipment layout; label	
equipment as new or existing	
Equipment list and equipment layout shall be on same page for reference	

Indicate page # OR 'N/A'	Drawide slavations for all agricument (a.g. 6" loss agrees agree has Drawt share part all agricultural loss
maleute page # OIC 1071	Provide elevations for all equipment (e.g., 6" legs, casters, cove base). Do not show casters less than 6" high unless equipment can be readily moved by a single person.
Indicate page # OR 'N/A'	A food preparation sink is required at most food facilities. For a typical retail food facility, you
	need the following sinks:
	Warewash
	Food preparation
	Mop/janitorial
	Handwashing sinks
	Lighting
Indicate page # OR 'N/A'	Submit a lighting plan, indicating exact footcandles for each area, per <u>CalCode</u> . Provide a
	photometric plan or indicate the foot-candles in each area.
Indicate page # OR 'N/A'	Provide shatter-proof covers or bulbs where required.
1 5	Trash Enclosure or Area
Indicate page # OR 'N/A'	Plans shall show the proposed trash and food waste storage area, including hose bibs and
material page in other twite	approved drainage in the trash enclosure. Easily cleanable and durable floors, walls, and ceilings are required.
Indicate page # OR 'N/A'	If floor drains and hot/cold water are provided to the trash enclosure, show drainage and hot/cold
1 5	plumbing details. Must be approved potable water. Drains must be plumbed to the sanitary
	sewer. Ventilation
Mark 'Yes' or N/A	Submit <i>Hood Exhaust Data Sheets</i> for hoods over cooking equipment and high temperature
	dishwashing machines. See <u>Plan Check Guide for Food Facilities</u> . The <u>Hood Exhaust Data</u>
	Sheets must be completed by a Mechanical Engineer or Mechanical Contractor. Hood Exhaust
	Data Sheets are required when:
	Installing new cooking equipment under the hood.
	 Installing new high temperature dishwashing machines (not undercounter).
	• Replacing existing cooking equipment and high temperature dishwashing machines with a different model.
	As required by inspector. Once Head Fisherest Data Sheets are approved and head and equipment are installed. Head.
	Once <i>Hood Exhaust Data Sheets</i> are approved and hood and equipment are installed, <i>Hood</i>
T 1' / // OD OMA 2	<u>Performance Data Sheets</u> must be submitted for review prior to the final inspection.
Indicate page # OR 'N/A'	Provide the Listing placard or equivalent, for Listed hoods. A photo is acceptable for existing
	hoods. If not provided, it will be treated as an unlisted hood. Documentation must include the
	model specific Listing criteria, including exhaust volume, filter airflow rates, hood overhang
	(which may be greater than the <u>California Mechanical Code</u> (CMC)), make-up air, duct details,
	and any equipment or other limitations.
Mark 'Yes' or N/A	Provide a hood overhang that is a minimum of six inches or as required by the manufacturer or
	CMC.
Mark 'Yes' or N/A	Submit the <i>Hood Exemption Application</i> - This application must be completed for any cooking
	or rethermalizing equipment (excluding soup warmers) that will not be placed under a complete
	hood exhaust ventilation system. No more than 2 pieces of hood exempt equipment will be
	allowed.
	Note: A double panini and a double oven are considered two pieces of equipment. Refer to
Mark 'Yes' or N/A	CCDEH Exemption Guide.
IVIAIR I CS OI IV/A	Submit ventilation plans for each room. Restroom ventilation must be interlocked with restroom
	lights.

Indicate page # OR 'N/A'	Provide a reflected ceiling plan indicating the location of required exhaust and supply air vents. Show exact CFM for each exhaust and supply air vent. Indicate the type of required comfort cooling in the facility, i.e., refrigerated air conditioning, evaporative cooling, or fans. Include a drawing legend for each room.
	Storage
Indicate page # OR 'N/A'	Provide backup ANSI approved food/beverage storage shelving equivalent to 25% of all kitchen space or one square foot of floor shelving per customer seat, whichever is greater (minimum 144 square feet of approved shelving).
Indicate page # OR 'N/A'	Bars or bar areas must have at least 72 square feet of backup storage shelving, separate from dry food storage shelving.
Indicate page # OR 'N/A'	Each separate department in a supermarket or other large food establishments must have its own backup storage meeting these requirements.
Indicate page # OR 'N/A'	Provide adequate storage facilities for non-food items (e.g., utensils, dishes, paper products, and linens).
Indicate page # OR 'N/A'	Provide lockers or designated storage area for employee belongings (1 per employee per shift).
	Water Heater
REQUIRED. Indicate page #	Complete the hot water demand calculation and submit with plans. See handout <u>Hot Water</u> <u>Demand Worksheet</u> & <u>CCDEH Hot Water Heater Guidelines.</u>
Mark 'Yes' or N/A	Provide water heater size, location and recovery rate as determined by the <u>Hot Water Demand</u> <u>Worksheet</u> (BTU's or kilowatts); and if floor mounted, approved installation (e.g., 6" legs). Provide cut sheet.
	Plumbing/Indirect Waste
Indicate page # OR 'N/A'	Submit complete plumbing layout showing sewer lines, cleanouts, floor drains, floor sinks, vents, grease trap or grease interceptor, hot and cold water lines, and direction of flow to sanitary sewer.
Indicate page # OR 'N/A'	Indirect waste receptacles (floor sinks/funnel drains) shall have an air gap that is twice the diameter of the drain pipe or 1", whichever is greater. This shall be shown for <u>utensil sinks</u> , prep sinks, walk-in condensers, beverage units, ice machines, hot water heater overflow, etc. Utensil sinks may be directly connected to the sanitary sewer if required by the local building department.
Mark 'Yes' or N/A	Floor sinks and funnel drains shall be readily accessible for inspection and cleaning.
Indicate page # OR 'N/A'	Location of all floor drains. Traffic areas slope to floor drains at least 1:50 where floor drains installed. Note: Floor drain are required in kitchens with Type I hood systems, utensil washing areas, meat or fish handling areas, produce trimming areas and bars.
Mark 'Yes' or N/A	Provide hot and cold water through a pre-mixing faucet at each sink. Faucet spout must reach each sink compartment of multi-compartment sinks. Provide cut sheet.
Indicate page # OR 'N/A'	Provide handsink(s) in each food and/or beverage handling area and utensil washing area.
Indicate page # OR 'N/A'	If applicable, the ice machine condensate waste line and ice bin waste lines must be plumbed separately and indirectly to a floor sink. Ice machine must be located within the food facility.
Indicate page # OR 'N/A'	Provide an approved backflow prevention device at equipment connected to waterlines. (i.e. proofers, espresso machine, beverage carbonator, etc.) Refer to the list of approved devices provided by the <i>Foundation for Cross-Connection Control and Hydraulic Research</i> .

Janitorial Facilities		
Mark 'Yes' or N/A	Will floor mats be provided in the kitchen?	
Indicate page # OR 'N/A'	Provide a mop sink or basin to prevent contamination of food, food preparations surfaces, utensils or equipment. It must be large enough to wash floor mats if these are used at the facility. Provide cut sheet. Must include: • Hot and cold running water through a pre-mixing faucet • An approved atmospheric vacuum breaker (AVB) at any threaded faucet *Approved finishes are required at the janitorial facilities.	
Indicate page # OR 'N/A'	Provide mop and broom hangers and storage for cleaning supplies.	
Vermin Control		
Indicate page # OR 'N/A'	Provide self-closing exterior hinged doors.	
Indicate page # OR 'N/A'	Provide approved automatically activated air curtain(s) at delivery doors.	
Indicate page # OR 'N/A'	Provide screening at all openable windows screened (minimum 16 mesh).	
REQUIRED. Mark with 'Yes'	There shall be no gaps, holes, harborage, or entryways for vermin (including underneath doors).	

This checklist includes common items, which are typically missing or inadequately detailed that may delay plan review and approval. This checklist is not all inclusive and is subject to change without notice. Refer to <u>CalCode</u>, CCDEH construction guidelines and the Marin EHS <u>Plan Check Guide</u> for additional requirements and details.

All County publications are available in alternative formats (Braille, Large Print, or CD), upon request. Requests for accommodations may be made by calling (415) 473-4381 (Voice) 473-3232 (TDD/TTY) or by e-mail at disabilityaccess@marincounty.org. Copies of documents are available in alternative formats, upon request. REV. 2-2022