

DeKalb County Health Department

2550 North Annie Glidden Road
DeKalb, Illinois 60115

Environmental Health Division
(815) 758-6673

Food Service Plan Review

Please complete **BOTH SHEETS** of this form and return it to the above address along with a set of facility plans and kitchen equipment layout, with all items clearly identified. **Include the required fee. New establishments \$_____ or Ext. Remodeled \$_____**

Name of Establishment _____

Location _____

Owner's Name _____

Address _____

Phone _____ FAX _____

Type of food establishment _____

Name of Certified Food Sanitation Manager(s), certificate number(s), and expiration date(s)

Anticipated Opening Date _____

A copy of the menu or complete list of all foods served must be submitted with the establishment plans.

Fresh produce served? Yes No

EQUIPMENT INFORMATION

Number and location of hand washing sinks _____

Food preparation sink: Yes No

Dishwashing facilities: Mechanical Manual

Type of sanitizer used: Chemical _____ Heat

Self-service operation: Yes No

PLUMBING

Water supply: Municipal Private Non-Community

Sewage disposal: Municipal Private

Water Heater size and type: _____

Grease interceptor size and location: _____

GARBAGE AND REFUSE DISPOSAL

Number and location of dumpsters _____

Dumpster platforms: Concrete Asphalt

Name of garbage disposal company: _____

Name of grease disposal company: _____

Materials recycled: _____

Recycling hauler: _____

CONSTRUCTION DETAILS

Wall finishes: Food prep areas: _____

Utensil washing areas: _____

Garbage handling area: _____

Ceiling finishes: Food prep areas: _____

Warewashing area: _____

Floor finishes: Food preparation areas: _____

Utensil washing areas: _____

Restrooms: _____

Self-closing devices: Restrooms Outer openings

FOOD SAFETY PROCEDURES

Foods cooked in advance (a day or more before serving):

Cooling methods: _____

Reheating methods: _____

Standard operating procedures are required for these foods and must be made available upon request.

Signature of owner: _____ Date _____