SNOHOMISH HEALTH DISTRICT
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New Restaurant Plan Review Checklist

Facility name: _____

This checklist will help you prepare a complete plan review packet. Submit the completed plan review packet and checklist with the required application fee. Incomplete plan review packets will not be accepted. Make a copy of this plan review packet for your records prior to submittal. Plan review fees are non-refundable.

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✓		ITEM	DESCRIPTION	Office Use Only
				Intake
☐	1	Application	**Provide complete Food Plan Review application.**	
☐	2	Water and sewer adequacy	**Provide proof that the facility is connected to an approved water and sewer or septic system.**	
☐	3	Plan review questionnaire	**Provide complete Plan Review Questionnaire form.**	
☐	4	Floor plan	**Provide a floor plan of the entire facility.** Floor plan must show location of all equipment (sinks, refrigeration, cooking, hoods, blenders, countertop appliances, etc.), restrooms, storage areas, etc. Floor plan must be no smaller than ¼ equals 1'.	
☐	5	Equipment list	**Provide make and model numbers of all equipment (including countertop appliances). Show location on floor plan. For remodels both new and existing equipment must be shown on the floor plan.** Only commercial grade, National Sanitation Foundation (NSF) or equivalent equipment is acceptable.	
☐	6	Finish schedule	**Provide the materials used for all floors, walls, ceilings, counters, and cabinets.**	
☐	7	Menus	**Provide a detailed menu of all the food and beverages you will be serving or a list of food and beverages you will be selling.** Include condiments, iced beverages and baked goods. Be sure to include specials and seasonal items. Only food and beverages listed may be served. **All breakfast, dinner, lunch, bar/lounge, happy hour, kids, catering, and online menus must be submitted.**	
☐	8	Food sources	**Provide a list of all food and beverage suppliers.**	
☐	9	Food preparation steps	**Provide a description of how all menu items will be prepared.**	
☐	10	Waste disposal	**Provide complete Waste Disposal form.**	
☐	11	Supplemental questions	**Provide complete Supplemental Question form(s) if applicable.** (catering and food processing)	
☐	12	Fee	**Include application fee.**	

I understand I cannot open this food establishment until I have received written approval from this program, obtained all annual operating permits and have been inspected and approved by all applicable city, county and state agencies.

Signature/Title _____ **Date** _____

Environmental Health Division
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General Food Plan Review Application

Application must be completed in full and submitted with fee and the items listed for processing:

Reviewed for completeness by _____ EHS Initials

TYPE OF PLAN REVIEW (Check applicable box)	
☐ $500 *(PE 5672)* **plus** $185 per hour after 2 hours	New food service establishment
☐ $185 Base fee **plus** $185 per hour for each add'l hour over 1 hour *(PE 5685)*	Remodel of existing food service establishment or revision of approved plan
☐ $335 Base fee **plus** $185 per hour for each add'l hour *(PE 5685 & 5642)*	Change of ownership / conditional operating permit **AND** remodel of existing food service establishment or revision of approved plan
☐ $185 *(PE 5682)* per inspection	Reopen former food service establishment
☐ $185 *(PE 5670)*	New Limited Grocery, Tap Room / Tasting Room
☐ $185 **plus** lab fees *(PE 5683)*	HACCP – when required by WAC for menu items
☐ $500 Base fee **plus** $185 for each add'l permit *(PE 5676 & 5675)*	New multiple permit food service establishment (large grocery store)
☐ $185 *(PE 5677)*	Plan review consultation (On and/or off site)

ESTABLISHMENT INFORMATION		
Name:		
Site Address:		
City:	ZIP:	
OWNER INFORMATION		
Name:	Phone:	
Address:	E-mail Address:	
City:	State:	Zip:
CONTACT INFORMATION (if different than owner)		
Name:	Phone:	
Address:	E-mail Address:	
City:	State:	Zip:
OTHER INFORMATION		
Type of Food Service Establishment:		
Local Building Inspection Agency:		
Water District:	Water Supply (check one):	☐ Private Well ☐ Public
Sewer District:	Sewage Disposal (check one):	☐ Sewer ☐ Onsite Sewage System

Inspection is based upon requirements of WAC 246-215; *Rules & Regulations of the State Board of Health for Food Service Sanitation.* Other agency approvals requisite to your operation may include County or City Planning, Building, Plumbing and Fire Departments, Water and Sewer Utilities.

APPLICANT SIGNATURE **DATE**

General_Plan_Review_Application_EH_112917_sm

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SNOHOMISH HEALTH DISTRICT
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Water and Sewer Adequacy / Food & Community Safety

Facility name: _____

Site address: _____

City: _____ State: ____ZIP: _____

Parcel number: _____ Proposed number of seats: _____

Contact name: _____ Phone: _____

Email: _____ Fax: _____

❑ New construction ❑ Remodel/Alteration ❑ Expansion of existing restaurant

❑ Yes ❑ No Is the facility connected to a septic system?

❑ Yes ❑ No Are public restrooms available?

❑ Yes ❑ No Is a grease trap required by sewer district or building department?

Describe the proposed project: _____

_____

_____

Sewage system ❑ **Sewer bill or availability letter attached** ❑ **Below completed by official**

This section should be completed by a Public Sewer System Official, if a sewer bill or availability letter is not provided.

Name of system: _____ Sewer utility: _____

The above system will provide service to the facility listed at the above address.

System official: _____ Phone: _____ Date: _____

Water system ❑ **Water bill or availability letter attached** ❑ **Below completed by official**

This section should be completed by a Public Water System Official, if a water bill or availability letter is not provided.

Name of system: _____ State ID number: _____

The above facility ❑ is connected ❑ has applied

The above system will provide service to the facility listed at the above address.

System official: _____ Phone: _____ Date: _____

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Plan Review Questionnaire

Facility Name: _____

1. Provide a description (the scope) of your project.

   _____

   _____

   _____

2. How many meals do you anticipate serving per day? _____
3. How many times per week do you anticipate delivery of food? _____
4. How many times per week do you anticipate delivery of dry goods? _____
5. ❑ Yes ❑ No Will you offer catering? If yes, complete the catering questionnaire.
6. ❑ Yes ❑ No Will you offer off-site food delivery?
7. ❑ Yes ❑ No Will alcoholic beverages be served? (include on menu)
8. ❑ Yes ❑ No Is there customer seating inside the facility?
   How many seats are in the facility, including the bar and lounge? _____
9. ❑ Yes ❑ No Is there customer seating outside the facility? How many seats are outside? _____
10. ❑ Yes ❑ No ❑ N/A If you have customer seating, is your restroom accessible to customers without passing through food preparation, food storage and/or scullery areas?
11. ❑ Yes ❑ No Do you have to go outside to access any walk-in refrigeration/freezers, food storage, equipment, and cooking or preparation areas? All locations must be clearly marked on floor plans.
12. Where will chemicals such as cleaning products be stored? _____

    _____

    _____

13. Where will employee belongings be stored? _____

    _____

    _____

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14. ❑ Yes ❑ No Is all lighting above food preparation, storage and service areas shatterproof or covered? (Required)

15. ❑ Yes ❑ No Will any food be self-service? If yes, list foods and how you will prevent contamination:

_____

_____

_____

16. ❑ Yes ❑ No Are all food and single-service items protected from customer contamination by a sneeze guard? This includes self-service condiment bars, salad bars, buffet lines, espresso counters and all other food preparation areas.

17. ❑ Yes ❑ No Are handwash sinks located at all cook lines, food preparation and service areas, and dishwashing areas?

18. ❑ Yes ❑ No Is a 3-compartment sink with attached drainboards on both sides provided? (Required)

19. ❑ Yes ❑ No Is each basin of the 3-compartment sink large enough to submerge and wash all equipment?

20. ❑ Yes ❑ No Do all sinks, including 3-compartment sinks, and food preparation sinks have basins with rounded corners? (Required)

21. ❑ Yes ❑ No Can you completely fill two compartments of the 3-compartment sink with hot water and provide hot water at all handwash sinks without the temperature dropping below 100°F? (Required)

22. ❑ Yes ❑ No ❑ N/A Are indirect drains (i.e. air gap) provided for all food preparation sinks, dishwashers, ice machines, soda dispensers, steam tables, woks, dipper wells, espresso machines, beer tap drip trays, walk-in refrigeration/freezers, and all equipment in which food or food contact equipment is placed? (Buckets are not allowed)

23. ❑ Yes ❑ No Does your menu include fresh fruit and vegetable items, such as lemons, limes, onions, tomatoes, potatoes, lettuce or berries?

24. ❑ Yes ❑ No ❑ N/A If your menu includes fresh fruit and vegetable items, is an indirectly drained food preparation sink with an integral drainboard provided? (Required)

25. ❑ Yes ❑ No Will you prepare, rinse or thaw under running water, raw meat, poultry, and or seafood? If yes, list:

_____

_____

_____

26. ❑ Yes ❑ No ❑ N/A If raw meat, poultry, or seafood are prepared, rinsed or thawed under running water, is a second indirectly drained food preparation sink with an integral drainboard provided? (Required. Sinks with multiple compartments may not be used for both produce and raw meat prep.)

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27. ❑ Yes ❑ No Is at least 16” of separation or proper barriers 16” tall provided between all food preparation sinks and any source of contamination?

28. ❑ Yes ❑ No Is at least 16” of separation or proper barriers provided between all produce preparation sinks and raw meat, poultry, and or seafood?

29. ❑ Yes ❑ No Are 16” high splash guards installed between all sinks that are less than 16” apart?

30. ❑ Yes ❑ No Are soap and paper towel dispensers installed inside the splash guard area at all handwash sink locations?

31. ❑ Yes ❑ No Are all handwash sink basins at least 10” long by 10” wide and 5” deep? (Required)

32. ❑ Yes ❑ No Do you have a designated mop sink? (Required)

33. ❑ Yes ❑ No Is the mop sink located so food and equipment are not contaminated when used?

34. ❑ Yes ❑ No Does the mop sink have a vacuum breaker installed?

35. ❑ Yes ❑ No Will a chemical dispensing system be installed at the mop sink?

36. ❑ Yes ❑ No ❑ N/A If a soda fountain system is used, is a reduced pressure backflow assembly (RPBA) installed and tested?

37. ❑ Yes ❑ No ❑ N/A If a soda fountain system is used, are all pipes and fittings used downstream of the reduced pressure backflow assembly (RPBA) non-corrodible? (copper or brass are prohibited)

38. ❑ Yes ❑ No Is all equipment commercial grade, NSF certified or equivalent? (Required)

39. ❑ Yes ❑ No Will any food be stored or prepared at another location? If yes, list name and address where food will be stored or prepared:

_____

_____

_____

40. ❑ Yes ❑ No Will any food be cooked or hot held unattended (i.e. overnight or more than 2 hours of unattended cooking)? If yes, the questionnaire for cooked or unattended food must be completed.

41. ❑ Yes ❑ No Will there be any cooking or food preparation outside the establishment? All locations must be clearly marked on floor plans.

42. ❑ Yes ❑ No Will any food of animal origin be undercooked at the customer’s request, such as steaks, eggs, or hamburger? If yes, list:

_____

_____

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43. ❑ Yes ❑ No Will any fish or seafood be served raw or undercooked? If yes, list:

_____

_____

44. ❑ Yes ❑ No ❑ N/A If fish or seafood will be served raw or undercooked, is proper parasite destruction documentation submitted?

45. ❑ Yes ❑ No Will any menu items include wild mushrooms? If yes, the wild mushroom questionnaire must be completed.

46. ❑ Yes ❑ No Will any food be smoked as a method of food preservation rather than flavor enhancement? (Used to preserve or change a food so it no longer requires refrigeration) If yes, you must submit the food preparation steps for all the smoked foods along with laboratory documentation of shelf stability for each food item.

47. ❑ Yes ❑ No Will any food be cured? If yes, the food preparation steps for all the cured foods must be submitted.

48. ❑ Yes ❑ No Will any food additives be used to preserve or change a food so it no longer needs to be refrigerated? If yes, the food preparation steps for all these foods along with laboratory documentation of shelf stability must be submitted for each food item.

49. ❑ Yes ❑ No Will a display tank be used for molluscan shellfish, such as oysters or clams? If yes, submit additional information as noted in the Molluscan Shellfish Tank questionnaire.

50. ❑ Yes ❑ No Will custom processing of animals be offered for a customer's personal use as food (i.e. deer) and not for sale or service in a food establishment? If yes, submit the food preparation steps including how custom processed foods will be kept separated from all other foods during receiving, processing, storage and handling.

51. ❑ Yes ❑ No Will any food be grown specifically for sale or service in the food establishment such as sprouts? If yes, the growing and food preparation steps for all these food items must be submitted.

52. ❑ Yes ❑ No Will any food be vacuum packaged or reduced oxygen packaged? If yes, submit additional information as noted in the Vacuum Packaging-Reduced Oxygen Packaging questionnaire.

53. ❑ Yes ❑ No Will any food be cook-chill or sous vide ? If yes, submit additional information as noted in the cook-chill or sous vide questionnaire.

If you answered yes to questions 44-51, include the proper food preparation process descriptions and variance request.

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Example Floor Plan

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1. One floor plan must be submitted with the name and address of establishment, contact person and phone number.

2. Each plan must be drawn to scale (no smaller than ¼" = 1') and show in detail the following:
   a. Number, type and location of all sinks and drainboards.
   b. Refrigeration and cooling equipment.
   c. Food preparation and service areas.
   d. Employee restrooms.
   e. Customer restrooms (required if you have indoor or outdoor seating).
   f. Dry goods storage area (show detail of shelving area and describe type of shelving).
   g. Employee storage (required).
   h. Service, bus or wait areas.

3. All equipment must be labeled on the floor plan and correspond to the equipment list.

Equipment List:

#	Item Name	Qty	Make	Model
1.	Freezer	1	Ice Line	F-158Z4
2.	Refrigerator 8x8 walk-in	1	ACME	R-789WI
3.	Rice cooker	1	ACME	CR-543
4.	Deep fryer	1	ACME	DF-876
5.	Char-Broiler	1	ACME	CB-123
6.	Gas range	1	GAPP	GR-332
7.	Wok	1	ACME	CW-3323
8.	Work table	4	ACME	EQ-4LOC
9.	3-compartment dish wash sink (with 2 drainboards)	1	ACME	S-3CWD
10.	Dishwasher	1	GAPP	DW-1234
11.	Shelving	5	ACME	EQ-3S
12.	Refrigerator sandwich prep	1	GAPP	R-SP1
13.	1-compartment produce food prep sink (with drainboard)	1	ACME	S-FPWD
14.	Mop sink	1	ACME	S-MOP
15.	Hot water heater	1	GAPP	HW-123G
16.	Ice machine	1	GAPP	IM-987
17.	Soda pop fountain dispenser	1	ACME	SP-5000
18.	Handwash sink wall mount	4	PORCLEAN	S-HWM
19.	Handwash sink	1	PORCLEAN	S-POR100
20.	Cash register	1	POS	CR-5582
21.	Coffee maker	1	GAPP	CM-37475
22.	Hood ventilation	1	GAPP	EQ-HV200
23.	Food warmer	1	ACME	EQ-FW1000
24.	Refrigerator 2 door beverage cooler	1	GAPP	R-200BC
25.	Splashguards 12" stainless steel	5	ACME	SG-412
26.	Employee storage	1	ACME	ES-6FTL
27.	1-compartment raw meat/seafood food prep sink (with drainboard)	1	ACME	S-FPWD

Facility Name: AAA #1 Drive In
Facility Address: 123 Main Street, Everett, WA 98201
Contact Person: J. D. Public
Contact Phone: (425) 339-5250

Scale ¼" = 1'

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FoodEstablishmentPlanReviewCheckList_EH_05_2017_pac

Equipment List

Facility name: _____

List **all food service equipment**, including make and model numbers. Examples include, but are not limited to, refrigerators, sinks, stoves, ovens, steam tables, blenders, ice machines, ventilation hoods, and all countertop appliances. If make and model number cannot be found, a picture of the equipment is required. The item numbers on this list must be the same as the item numbers for the equipment on the floor plan.

All equipment ID numbers must correspond to location on floor plan. Equipment must be commercial grade and meet American National Standards Institutes (ANSI) standard (NSF, ETL or UL Sanitation listed). Only one item per line.

Sample Equipment List

ID #	Kind of equipment	Make	Model #
1	Refrigerator 8'x8' walk-in	ACME	R-789WI
2	Ice machine	GAPP	IM-987
3	Rice cooker	ACME	CR-543
4	3-compartment dish wash sink (with 2 drainboards)	ACME	S-3CWD

❑ The equipment list is included on floor plan.

Please add a second page if needed.

EquipmentList_EH_05_2017_pac

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Finish Schedule

Facility name: _____

Provide the materials used for all floors, walls, coving and ceilings.

- All bare wood surfaces (doors, trim, counters, shelves, cabinets, etc.) must be painted or sealed.
- Floors must be constructed of light colored, smooth, easily cleanable, non-absorbent material. Expansion joints, seams, saw cuts and the like in concrete floors in all areas, including customer seating areas, must be filled and sealed so as to provide a smooth and cleanable surface.
- Coving must be installed at all wall/floor junctions.
- Walls must be constructed of light colored, smooth, easily cleanable, non-absorbent materials. Provide Fiber Reinforced Plastic (FRP), laminate plastic, tile, or similar waterproof material on wall surfaces behind sinks, dishwashers, food preparation areas, and areas exposed to moisture.
- Ceilings above the kitchen, lounge, wait and service areas must be constructed of light colored, smooth, easily cleanable, non-absorbent materials. Unsealed and or perforated acoustical ceiling tiles are not allowed. Vinyl covered ceiling tiles such as vinyl rock or other washable surfaces are allowed.
- All lighting over food preparation, handling and storage areas must have covers or shatterproof bulbs.

Sample finish schedule

	Floors	Coving	Walls	Ceiling	Counters
Kitchen	*vinyl tile*	*6" rubber base*	*FRP*	*painted gypsum board*	*laminate*
Wait area	*vinyl tile*	*4" rubber base*	*painted gypsum board*	*vinyl rock*	*laminate*
Lounge	*sealed concrete*	*4" rubber base*	*varnished wood*	*Armstrong VL tiles*	*granite*
Dining area	*carpet*	*4" rubber base*	*painted gypsum board*	*painted gypsum board*	*n/a*
Bathrooms	*ceramic tile*	*ceramic tile*	*painted gypsum board*	*painted gypsum board*	*laminate*

Shelving	*Refrigerators and dry storage: stainless steel wire shelves; liquor storage: varnished wood*
Lighting	*Bar lights are shatterproof. All kitchen lights have covers.*

Finish schedule

❑ Included on floor plans

	Floors	Coving	Walls	Ceiling	Counters
Kitchen					
Wait area					
Lounge					
Dining area					
Bathrooms					

Shelving	
Lighting	

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Provide copies of your menus. Include all food and beverages you will serve. If the facility is a grocery store serving only fruits, vegetables or commercially prepackaged food, a list of goods sold may be submitted in place of the menu. Be sure to include specials and seasonal items. **Only food and beverages listed may be served. Submit copies of all breakfast, dinner, lunch, bar/lounge, happy hour, kids, catering, and online menus, fresh sheets, table tops or menu boards.** If a menu board will be used, provide photographs of the menu showing all food and beverages listed. All menu items must be readable in photographs.

A **consumer advisory** is required for all food of animal origin that is offered raw, undercooked or cooked to the customer's specification. Be sure all menu items requiring a consumer advisory are clearly identified and remind the patron that consuming these foods may result in foodborne illness. Consumer Advisory information may be found at Washington State Department of Health under Code Clarifications.

The menu, food preparation steps, and the mode of operation may be restricted to protect public health (WAC 246-215).

Sample Menu

AAA #1 Drive In

Breakfast
Pancakes $2.00
Eggs*, hash browns, bacon, toast $3.00
Oatmeal..... $2.00
Lunch
Ham sandwich..... $3.00
Pho soup*..... $3.00
Rib eye steak* $10.00
Dinner
Prime rib*.....$10.00
Shrimp pasta $10.00
Deluxe cheeseburger* $10.00
Chicken salad.....$10.00

Salads
Mixed greens.....$3.00
Romaine.....$3.00
Caesar* $3.00
Beverages
Fountain beverages
Large.....$3.00
Medium $2.00
Small.....$1.00
Coffee $1.00
Tea.....$1.00

* These menu items are served raw, undercooked or cooked to your specification.
Consuming raw or undercooked food may increase your risk of foodborne illness.

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Food Sources

Facility name: _____

List all food and beverage suppliers you use. Please check the boxes of the common suppliers you use and add the name and phone number of any of your suppliers that are not already listed.
This list is provided for informational purposes only and for the convenience of the user. This should not be taken as an endorsement by the Snohomish Health District. This is not a complete list of available suppliers. Look in the Yellow Pages or similar references for additional suppliers.

Name of supplier	Phone number
❑ Boyd's Coffee	800.545.4077
❑ Cash N Carry (Everett)	425.339.2628
❑ Charlie's Produce	206.625.1412
❑ Coke	800.647.2653
❑ Costco (Everett)	425.379.7451
❑ Costco Business Center (Lynnwood)	425.640.7700
❑ Food Services of America	425.251.9100
❑ Franz Bakery	206.682.2244
❑ Pepsi	425.355.2212
❑ Restaurant Depot (Woodinville)	425.483.5600
❑ Sam's Club	206.362.6700
❑ Sunfood Trading	206.682.8823
❑ Sysco	206.721.1777
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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Food Preparation Steps

Provide the food preparation steps for all menu items. Include how each menu item is obtained, stored, prepared, cooked, cooled and kept hot before serving. Menu items that are prepared in an identical way may be grouped together. Menu, food preparation steps, and the mode of operation may be restricted to protect public health (WAC 426-215).

Examples:

BBQ beef/pork – beef and pork are delivered frozen and stored in the walk-in refrigerator to thaw. After the beef and pork are thawed, they are marinated in our special sauce in the walk-in refrigerator overnight. Meats are then cooked on the smoker. After smoking, the beef and pork are shredded and mixed with our BBQ sauce and cooled in hotel pans at 2” food depth in the walk-in refrigerator. After meats are cooled to 41°F, they are covered with plastic wrap. Meats are reheated in the steamer as needed and kept in the front area steam table until served. Leftover items are cooled uncovered in the walk-in refrigerator at 2” food depth.

All hamburgers – patties are purchased frozen. Frozen patties are placed on grill once ordered. Hamburger patties are not cooked in advance.

Pho soup – beef bones are delivered and stored in the walk-in refrigerator. The beef bones are placed into a large pot, and water is added. The bones and water are brought to a boil and vegetables and spices are added. After soup is cooked half of the broth is held hot on the range at above 135°F and the remainder is cooled to 41°F uncovered in the walk-in refrigerator at 2“food depth. The remaining pho soup is reheated to over 165°F the next day before use.

Chicken salad – raw chicken is purchased frozen and thawed in the walk-in refrigerator. Chicken is marinated overnight in the walk-in refrigerator. Chicken is cooked on char-broiler, cut into small pieces and placed on sheet pan at 2” food depth to cool in the walk-in refrigerator. After chicken has cooled to 41°F, the chicken is portioned and wrapped. Portioned chicken is kept in the preparation refrigerator until ordered. Chicken is mixed with greens and salad toppings per order. All salad greens are rinsed each morning in the food preparation sink and stored in the preparation refrigerator.

Ham/turkey/roast beef sandwiches – ham, turkey and roast beef are purchased pre-cooked. Meat is sliced daily, portioned, and placed in the preparation refrigerator. All fruits and vegetables are rinsed each morning in the food preparation sink and stored in the preparation refrigerator. Sandwiches are made to order and served cold or heated on panini grill.

Shrimp pasta – shrimp is purchased pre-cooked and frozen. Shrimp is thawed in the walk-in refrigerator. Pasta is par-cooked on stove and cooled at 2” food depth uncovered in the walk-in refrigerator. Once cooled to 41°F, the shrimp and pasta are portioned, bagged and stored in the preparation refrigerator. When ordered by customer, portioned pasta and shrimp are sautéed on stove-top.

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Waste Disposal

Facility name: _____

Garbage

Name of the company: _____

Size and type of container: _____

Frequency of pick-up: _____

Location of container: _____

Distance from building: _____

Waste oil

Name of the company: _____

Size and type of container: _____

Frequency of pick-up: _____

Location of container: _____

Distance from building: _____

Recycling

Name of the company: _____

Size and type of container: _____

Frequency of pick-up: _____

Location of container: _____

Distance from building: _____

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