



**GREENWICH DEPARTMENT OF HEALTH**

**DATE:** \_\_\_\_\_ **APPROVED**

**FOOD ESTABLISHMENT  
PLAN REVIEW CHECKLIST (OWNERS CHECKLIST)**

**ESTABLISHMENT:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

<b>MENU</b>	
<b>Y/N</b>	
	Menu provided
	Recipes provided
	Flow charts provided
	Delivery schedules provided M__T__W__Th__F__S__
<b>SINKS/DISHWASHERS</b>	
<b>HOT WATER HEATERS</b>	
<b>GREASE TRAPS</b>	
	Handsinks provided:
	Cooking line
	Prep area
	Service area
	Warewashing area
	Food preparation sink(s) in each prep area
	3 compartment sink
	Mop sink
	Dishwasher
	Grease trap(s)
	Grease trap(s) approved by sewer department
	Hot water capacity adequate
<b>REFRIGERATION</b>	
	Adequate refrigeration provided
	Adequate freezer storage
	Are thermometers provided in each unit

<b>CALCULATION INFORMATION</b>	
SEATING CAPACITY (include from all areas of establishment) ⇒	
MAXIMUM MEALS SERVED (number of meals served between deliveries)⇒	
What is the largest piece of equipment that will need to fit in the 3 compartment sink?	_____
What is it's dimensions: ___h x ___w x ___d	
What are the dimensions of one well of the 3 compartment sink: ___x ___x ___	
<b>HOT WATER HEATER:</b>	
<u>POT SINK ONLY</u> - size must equal total gallons of full pot sink + plus recovery rate in gph (see spec sheet) = ___gallons	
<u>POT SINK AND DISHMACHINE:</u> size must equal full pot sink + ½ water consumption in gph of dishmachine: ___gallons	
<u>TO CALCULATE VOLUME (IN GALLONS) OF POTSINK:</u> length x width x height x 7.5 x 3	
<b>GREASE TRAP(S):</b>	
Grease trap(s) must be provided for:	
→Pot sink	
→Waterwash cooling exhaust hood	
→Wok stoves w/inline food waste sink that strains food debris	
→Large stationary kettles w/floor drain/grates	
TO CALCULATE: You need GPM of each(see spec sheets on equipment) for potsink-total gallons to full capacity x .40 = GPM (gallons per minute)	
<b>REFRIGERATION CAPACITY:</b>	
<u>Max # of meals served x .085</u>	
.40	=cubic ft req for walk in space
<u>Max # of meals served x .085</u>	
.75	=cubic ft req for reach in space
To get cubic ft = h x w x d = cubic feet	
To convert cubic ft. to sq. ft:	
cubic ft ÷ht of unit = sq ft interior of unit, then multiple that number by 1.25 to get exterior size of square footage of storage space	

<b>FLOOR SURFACES</b>	
HAVE YOU PROVIDED THE PROPER FLOORING FOR:	
<b>Y/N - PROVIDE TYPE OF SURFACE</b>	
<input type="checkbox"/>	Cooking line Surface _____
<input type="checkbox"/>	Preparation area Surface _____
<input type="checkbox"/>	Service area Surface _____
<input type="checkbox"/>	Walk in refrigeration Surface _____
<input type="checkbox"/>	Stairwells Surface _____
<input type="checkbox"/>	Storage rooms Surface _____
<input type="checkbox"/>	Basement (if used) Surface _____
<input type="checkbox"/>	Warewashing area Surface _____
<input type="checkbox"/>	Are all floor to wall connections <b>COVERED</b> properly?

<b>WALL SURFACES</b>	
HAVE YOU PROVIDED THE PROPER WALL SURFACES FOR:	
<b>Y/N - PROVIDE TYPE OF SURFACE</b>	
<input type="checkbox"/>	Cooking line Surface _____
<input type="checkbox"/>	Preparation area Surface _____
<input type="checkbox"/>	Service area Surface _____
<input type="checkbox"/>	Walk in refrigeration Surface _____
<input type="checkbox"/>	Warewashing area Surface _____
<input type="checkbox"/>	Storage rooms Surface _____
<input type="checkbox"/>	Basement (if used) Surface _____

<b>CEILING SURFACES</b>	
HAVE YOU PROVIDED THE PROPER CEILING FOR:	
<b>Y / N PROVIDE TYPE OF SURFACE</b>	
<input type="checkbox"/>	Cooking line Type _____
<input type="checkbox"/>	Preparation area Type _____
<input type="checkbox"/>	Service area Type _____
<input type="checkbox"/>	Walk in refrigeration Type _____
<input type="checkbox"/>	Warewashing area Type _____
<input type="checkbox"/>	Storage rooms Type _____
<input type="checkbox"/>	Basement (if used) Type _____ <i>Areas with waste lines cannot be used for food prep or storage</i>

<b>Y / N STORAGE SPACE</b>	
<input type="checkbox"/>	Is there adequate storage space for this facility?
TO CALCULATE:	
# OF MAX MEALS x .050 FT <sup>3</sup>	
USABLE HEIGHT(a-(b+c)) x .4 = REQ SQ FT AREA NEEDED	
a = height from floor to ceiling	
b = distance bottom shelves are from floor	
c = distance top shelves are from ceiling	
Square feet provided on plan = _____ (length X width)	
<b>Y / N AISLE SPACE</b>	
<input type="checkbox"/>	Have the plans provided a minimum 36" aisle space in all areas of the establishment?

**Y / N BATHROOMS**

		Are there two bathrooms provided (male/female) and are Handicap accessible?
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**LOCKER/EMPLOYEE STORAGE**

		Has an area been provided for employee's personal belongings separate from food areas?
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**GARBAGE/RODENT PREVENTION**

		Is there adequate garbage storage?
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		Do all garbage storage containers have tight covers?
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		Are all openings to outside tight and screened when necessary?
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**LIGHTING**

		Have you provided adequate lighting in all areas?
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**SIGNS**

		Have signs been posted for smoking areas?
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		Has the food risk warnings been posted either visible to public or in the menu?
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		Have you posted the Consumer Advisory on your menu?
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**FOOD PROTECTION**

		Are sneeze guards been provided for displayed food items?
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		Has overhead protection been provided? (It shlds)
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**QUALIFIED FOOD OPERATOR/DESIGNATED ALTERNATE/TRAINING MATERIALS**

**Y / N**

		Is there a <b>Q</b> ualified <b>F</b> ood <b>O</b> perator? If yes, who? _____ Hours scheduled to work: M__T__W__Th__F__Sa__S__
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		Is there a Designated Alternate? If yes, who? _____ Hours scheduled to work: M__T__W__Th__F__Sa__S__
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		Does this satisfy coverage of facility if QFO is not present?
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		Have training materials and records been organized for all employees? If yes, specify what is in place _____ _____ _____ _____ _____ _____ _____
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**ADDITIONAL ITEMS/COMMENTS:**

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**Owner:** \_\_\_\_\_

**DATE:** \_\_\_\_\_