



FOOD FACILITY CHANGE IN OWNERSHIP PACKET

(For all operators of Food Service Operations and Retail Food Establishments)



CHANGE IN OWNERSHIP PACKET SUBMISSION

This application is complete and accurate to the best of my knowledge. **By signing this document, I agree that I have read and understood this packet in its entirety and will submit all required documents, including the plan review fee. I understand that it may take up to 30 days for review and a separate license fee will be collected after the pre-license inspection.**

Signature of applicant: _____ Date: _____

Submit Plans To: Miami County Public Health
510 West Water Street Suite 130
Troy, Ohio 45373

Questions? Phone: 937-573-3504
Email: EH@miamicountyhealth.net



Plans Submitted To: Building Dept: _____ Fire Dept: _____ Plumbing Div: _____ Zoning: _____ EPA: _____ (If applicable)

Other Agency: _____

Dennis R. Propes, REHS, MPA
Health Commissioner

James S. Burkhardt, DO
Medical Director

Miami County Public Health
510 West Water Street Suite 130
Troy, Ohio 45373-2985
P: 937-573-3500
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REQUIRED DOCUMENTATION

Required documentation includes (keep in mind some items may not apply to your facility):

- One (1) complete sets of drawings of the facility
- Manufacturer's specification sheets for all commercial equipment
- Menu
- Time marking procedures
- Cooling and Reheating procedures
- Bodily fluid clean-up procedure and kit*
- Signed employee illness policy*
- Pest control plan
- Plan for cleaning grease trap
- Fully completed plan review packet

*Items asterisked are not required prior to opening, but required upon initial inspection

EDUCATION REQUIREMENTS

As an owner of a food service operation (FSO) or retail food establishment (RFE) it is your responsibility to ensure that employees are properly educated in food safety as required. For risk level 1 and 2 facilities, it is required that at least one employee per shift have the Person-In-Charge Certification in Food Safety. For risk level 3 and 4 facilities, it is required that at least one employee in the facility has a Manager's Certification in Food Safety AND while this individual is not on-site, at least one employee per shift must have the Person-In-Charge Certification in Food Safety. Although not directly mandated, it is HIGHLY recommended to have as many employees as possible food safety certified.

Every inspection of the facility will require that copies of the applicable food safety certifications be provided for verification.

EQUIPMENT REQUIREMENTS

Per the Ohio Uniform Food Safety Code 3717-1-4.1 (KK), all equipment in the facility must be commercial grade and certified by a recognized testing agency. **No household/residential equipment is permitted for use.**

All facilities are required to have a sufficient number of hand-washing sinks. Hand-washing sinks are required in the following areas:

1. Dishwashing area
2. Bar area
3. Food prep area(s)
4. Server station(s)
5. Any other location deemed necessary by the reviewer based on the type of activity in that location

Hand-sinks must be conveniently located and supplied with soap and disposable towels. **Hand-sinks in restrooms will not fulfill the requirements above and are considered separately when determining an appropriate number of hand-sinks for the facility.** Hand-sinks are to be used for hand washing only.



All facilities are required to install floor mounted, curbed mop sinks. The mop sinks must include a faucet (with a vacuum breaker), drain, and mop hangers for adequate drying of mop heads. Mop sinks must be located on each floor of a facility with food prep areas. Fiber-reinforced plastic (FRP) must be installed on walls directly behind and adjacent to the mop sink.

A food preparation sink is required for the washing/rinsing of produce or thawing food products. A food preparation sink must have an indirect drain with an air gap of at least 2-4 inches above the inlet to prevent backflow from a sewage system into equipment where food is processed.

A 3-compartment sink is required in all facilities where the washing of utensils/equipment occurs. The 3-compartment sink must have two (2) drain boards. Each compartment of the sink shall be large enough to submerge the largest utensil or piece of equipment completely.

The food facility is required to have sufficient capacity to keep food cold/hot (i.e., sufficient number of cold and hot holding units).

Floors, walls, and ceilings in all food areas are required to be smooth and easily cleanable. Absorbent, rough, porous, or otherwise hard to clean surfaces are not approvable.

PLAN REVIEW PROCESS

Step 1: Submit Plans

- All required documents shall be supplied.
- Plan review fee is required before review of plans may occur.

Step 2: Plan Review Process

- Within 30 days of submission, MCPH will review the plans and contact you with an approval or disapproval.
- Plans may require additional information or changes; changes must be implemented before approval.
- Facility consultation (if requested).

Step 3: Plan Approval

- Upon plan approval, you may begin construction.
- The plumbing division will conduct their own review of your plans. Plumbing approval is separate from this approval.
- Ensure all contractors obtain permits as required prior to construction.

Step 4: Pre-license Inspection(s)

NOTE: The Certificate of Occupancy is required prior to the final pre-license inspection

- The pre-license inspection is conducted to assess the facility prior to opening
- The facility must be fully operational upon inspection
- Additional changes to the facility may need to be implemented prior to issuance of the food license

Step 5: Pay for Food License

- After a successful pre-license inspection, you will fill out an application and pay for a food license
- Once payment has been processed your facility is approved to operate and the license will be sent in the mail



FOOD FACILITY PLAN REVIEW APPLICATION

Date: _____

Type: FSO ____ RFE ____

Facility Information:

Name of Facility: _____

Name of License Holder: _____

Address of Facility: _____
(City) (State) (Zip Code)

Telephone: _____ Email: _____

Applicant/Owner Information:

Applicant's Name: _____

Title (Owner, Manager, Architect, etc): _____

Mailing Address: _____
(City) (State) (Zip Code)

Telephone: _____ Email: _____

Estimated Project Start Date: _____ Estimated Completion Date: _____

Main Point of Contact for Plan Review Questions: _____

Type of Establishment (Check all that apply):

- Restaurant/Diner
- Grocery Store
- Convenience Store
- Coffee Shop
- Bar
- Meat/Fish Market
- Bakery
- School
- Child Care Facility
- Long Term Care/Nursing Home
- Pizza Parlor
- Other (please specify)

Days/Hours of Operation (fill out all that apply):

DAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HOURS							



PLAN REVIEW COMPONENTS

Provide plans that are a minimum of 11 x 14 inches in size including the layout of the floor plan accurately drawn to a minimum scale of ¼ inch = 1 foot.

Include the proposed menu, seating capacity, and projected meal volume for the food operation.

Show the proposed location and placement of all food equipment. Each piece of equipment must be clearly identified and referenced to the Equipment Schedule as applicable. Submit drawings of self-service hot and cold holding units with sneeze guards.

Please indicate that the following are included or indicate if not applicable (N/A):

- Backflow preventer installed/certified
 - Serial number _____
- EPA approval of water *{if applicable}*
- EPA approval of septic *{if applicable}*
- Lighting plan submitted
- Plumbing plan (indicate all floor drains, floor sinks, and grease trap)
- Interior finish schedule
- Dumpster enclosure (sloped to drain)
- Menu submitted
 - Consumer advisory (raw and/or undercooked foods)
- Risk level identified
 - If Risk Level 4
 - Cooling procedure
 - Time controlled for temperature procedure
 - Catering
- Site plan for pre-existing building, including dumpster and water connection areas (ex. Google Maps)
- Verifiable employee illness policy
- Plan for cleaning grease trap
- Pest Control Plan
- Bodily fluid cleanup procedure
- Food safety certifications (Person-In-Charge and Manager's Certifications)

- Facility Floor Plan, *drawn to scale*, to include (if present):**
 - Location of equipment
 - Location of hand sinks
 - Location of dump sinks
 - Location of 3-compartment sink
 - Location of dish machine
 - Location of preparation sink
 - Location of mop sink
 - Location of dry goods, chemical storage, and personal belongings storage
 - Location of entrances and exits
 - Seating capacity
 - Total square footage of facility



INTERIOR FINISHES

Room Name	Floors	Walls	Ceilings	Cove Base

Note: Walk-in coolers are required to have cove base on the interior if the floor is concrete. Additionally, FRP is not approved as a surface inside of walk-in coolers.

Common Flooring Finishes: quarry tile, VCT, ceramic tile, poured seamless epoxy, sealed concrete

Common Wall Finishes: Fiber-reinforced panels (FRP), stainless steel panels, ceramic tile

Common Ceiling Finishes: Plastic coated fiberboard, metal clad fiberboard

LIGHTING SCHEDULE

Lighting requirements for the facility are as follows:

At least 110 lux (10 foot-candles) at a distance of 30 inches above the floor, in walk-in refrigeration units and dry food storage areas.

At least 220 lux (20 foot-candles) where food is provided for consumer self-service such as buffets and salad bars, or where fresh produce or packaged foods are sold or offered for consumption. Also, in all areas used for handwashing, warewashing, equipment/utensil storage, and in toilet rooms.

At least 540 lux (50 foot-candles) at a surface where a food employee is working with food or working with utensils or equipment.

Shatterproof light bulbs or shields/protectors are required on fixtures installed in all food preparation and warewashing areas, and where exposed foods are stored in any applicable pieces of equipment with the purpose of display, serving, etc.



FOOD PREPARATION REVIEW

Answer all questions that pertain to your facility or write N/A

Indicate the categories of food products to be handled, prepared, and served:

<u>CATEGORY</u>	<u>YES</u>	<u>NO</u>
Thin meats, poultry, fish, eggs (Hamburgers, sliced meats, fillets)	()	()
Thick meats, whole poultry (Roast beef, whole turkey, chickens, hams)	()	()
Cold processed foods (salads, sandwiches, vegetables)	()	()
Hot processed foods (soups, stews, rice/noodles, gravy, casseroles)	()	()
Bakery goods (pies, custards, cream fillings, & toppings)	()	()

Other (please describe):

Describe how dry goods will be stored off the floor

If raw meats, poultry, and seafood will be stored in the same refrigerators/freezers as cooked and ready to eat foods, describe how cross contamination will be prevented



Describe how hot foods will be maintained at 135°F or above

Describe how cold foods will be maintained at 41°F or below

Describe how hot foods will be rapidly cooled to 41°F or below (attach procedure to this packet)

Describe how hot foods will be rapidly reheated to 165°F for 15 seconds within 2 hours or less

Describe how frozen foods will be thawed

Will fruits and vegetables be washed in the facility, or will all fruits and vegetables be received pre-washed and pre-cut?

Describe how bare hand contact with ready to eat foods will be prevented

Describe any self-cleaning equipment or heat treatment dispensing freezers (ice cream machines)



Describe the sanitizer(s) to be used in the facility (include type, concentration, and availability of test kit)

Will you be providing catering services? Yes No If yes, describe:

Where and how will garbage/refuse be stored inside your facility?

Describe the facility water supply (public or private, if private, EPA approval letter, etc.)

Describe your dish machine (high temp with booster heater, chemical, etc.)

Describe the cleaning procedure for items which are too large to clean in the 3-compartment sink or dish machine (clean in place)

Describe how equipment and utensils are air dried, and the space in which you will be air drying.
(Do you have shelves/space to allow all items washed to air dry?)



GENERAL FACILITY CONSIDERATIONS

Are insecticides/pesticides/toxic chemicals (including medications) stored separately from cleaning/sanitizing agents as well as away from all foods, food preparation, food contact surfaces and multi-use item storage areas?

YES **NO** (Please circle)

Are hand drying facilities (paper towels, etc.) available at all handwashing sinks as well as instructions (signs/posters) as to how to properly wash hands?

YES **NO** (Please circle)

Are covered waste receptacles available in each restroom?

YES **NO** (Please circle)

Is hot and cold running water under pressure available at each handwashing sink?

YES **NO** (Please circle)

Are all toilet room doors self-closing?

YES **NO** (Please circle)

Are there floor drains in the facility?

YES **NO** (Please circle)

If yes, number of drains and locations? _____

Are there any food items being handled or prepared outside the kitchen?

YES **NO** (Please circle)

Is there a seating area for customers coming into the facility?

YES **NO** (Please circle)

If yes, what is the maximum capacity? _____

What is the projected hourly meal volume at the busiest time of the facility operation?

____ Orders / ____ Hour

Is a separate water line being installed for a pop machine or beverage area?



YES NO (Please circle)

If yes, who will be installing it? _____

Would you like a meeting on-site at the existing facility (if applicable)?

YES NO (Please circle)

FACILITY RISK LEVELS

Food facilities are licensed as either a Risk Level **I**, **II**, **III**, or **IV**. Risk levels describe the potential risk that the facility poses to public health as well as the probability of a foodborne illness. As the risk level increases, so does the number of inspections performed. **I** & **II** are once per year, and **III** & **IV** are twice per year.

Risk level I: poses potential risk to the public in terms of sanitation, food labeling, sources of food, storage practices, or expiration dates. Examples of risk level **I** activities include, but are not limited to, an operation that offers for sale or sells:

- Coffee, self-service fountain drinks, prepackaged non-potentially hazardous beverages;
- Pre-packaged refrigerated or frozen potentially hazardous foods;
- Pre-packaged non-potentially hazardous foods;
- Baby food or formula.

Risk level II: poses a higher potential risk to the public than risk level **I** because of hand contact or employee health concerns but minimal possibility of pathogenic growth exists. Examples of risk level **II** activities include, but are not limited to:

- Handling, heat treating, or preparing non-potentially hazardous food;
- Holding for sale or serving potentially hazardous food at the same proper holding temperature at which it was received; or
- Heating individually packaged, commercially processed potentially hazardous foods for immediate service.

Risk level III: poses a higher potential risk to the public than risk level **II** because of the following concerns: proper cooking temperatures, proper cooling procedures, proper holding temperatures, contamination issues or improper heat treatment in association with longer holding times before consumption, or processing a raw food product requiring bacterial load reduction procedures in order to sell it as ready-to-eat. Examples of risk level **III** activities include, but are not limited to:

- Handling, cutting, or grinding raw meat products;
- Cutting or slicing ready-to-eat meats and cheeses;
- Assembling/cooking potentially hazardous food that is immediately served, held hot or cold, or cooled;
- Operating a heat treatment dispensing freezer;
- Reheating in individual portions only; or
- Heating of a product, from an intact, hermetically sealed package and holding it hot.



Risk level IV: poses a higher potential risk to the public than risk level III because of concerns associated with: handling or preparing food using a procedure with several preparation steps that includes reheating of a product or ingredient of a product where multiple temperature controls are needed to preclude bacterial growth; offering as ready-to-eat a raw potentially hazardous meat, poultry product, fish, or shellfish or a food with these raw potentially hazardous items as ingredients; using freezing as a means to achieve parasite destruction; serving a primarily high risk clientele including immuno-compromised or elderly individuals in a facility that provides either health care or assisted living; or using time in lieu of temperature as a public health control for potentially hazardous food; or performs a food handling process that is not addressed, deviates, or otherwise requires a variance for the process.

Examples of risk level IV activities include, but are not limited to:

- Reheating bulk quantities of leftover potentially hazardous food more than once every seven days; or
- Caterers or other similar food service operations that transport potentially hazardous food.

MCPH FEE SCHEDULE (2023)

Once you have determined your license category and risk level, you can use the chart below to determine your fees. Plan review fees apply to new facilities, altered facilities, and risk level changes. Plan review fees are not annual; license fees are. The license must be renewed by March 1st of every year. Please note that fees are the same for FSOs and RFEs but vary according to risk level and size.

Risk Level	Local Fee	State Fee	Total Annual License Fee	Plan Review Fee
Level 1 < 25,000 sq. ft.	\$167.00	\$28.00	\$195.00	\$99.00
Level 2 < 25,000 sq. ft.	\$187.00	\$28.00	\$215.00	\$111.65
Level 3 < 25,000 sq. ft.	\$362.00	\$28.00	\$390.00	\$227.15
Level 4 < 25,000 sq. ft.	\$459.00	\$28.00	\$487.00	\$282.70
Level 1 > 25,000 sq. ft.	\$242.00	\$28.00	\$270.00	\$140.25
Level 2 > 25,000 sq. ft.	\$254.00	\$28.00	\$282.00	\$146.30
Level 3 > 25,000 sq. ft.	\$910.00	\$28.00	\$938.00	\$542.85
Level 4 > 25,000 sq. ft.	\$965.00	\$28.00	\$993.00	\$576.95