



WHOLESALE FOOD PLAN REVIEW APPLICATION

Establishment Information:

New Change of Ownership
 Remodel Menu/Equip Change
 HACCP Change of Use

Date of Application: _____

Service	Fee	
Full/Base Review	\$285	\$285
Change of Ownership	\$145	
Minor Remodel	\$145	
HACCP/Process Review	\$145	
Add'l Endorsement(s)	\$60	
Resubmittal Fee	\$100	
Non-Public Water Review	\$145	
Wastewater Review	\$60	
Total	--	

Name of Establishment: _____

Establishment Address: _____

Establishment Mailing Address: _____

Establishment Phone: _____ Email: _____

Contact Name: _____ Title: _____

Contact Mailing Address: _____

Contact Phone: _____ Email: _____

Below for MCCHD Use: Intake Review

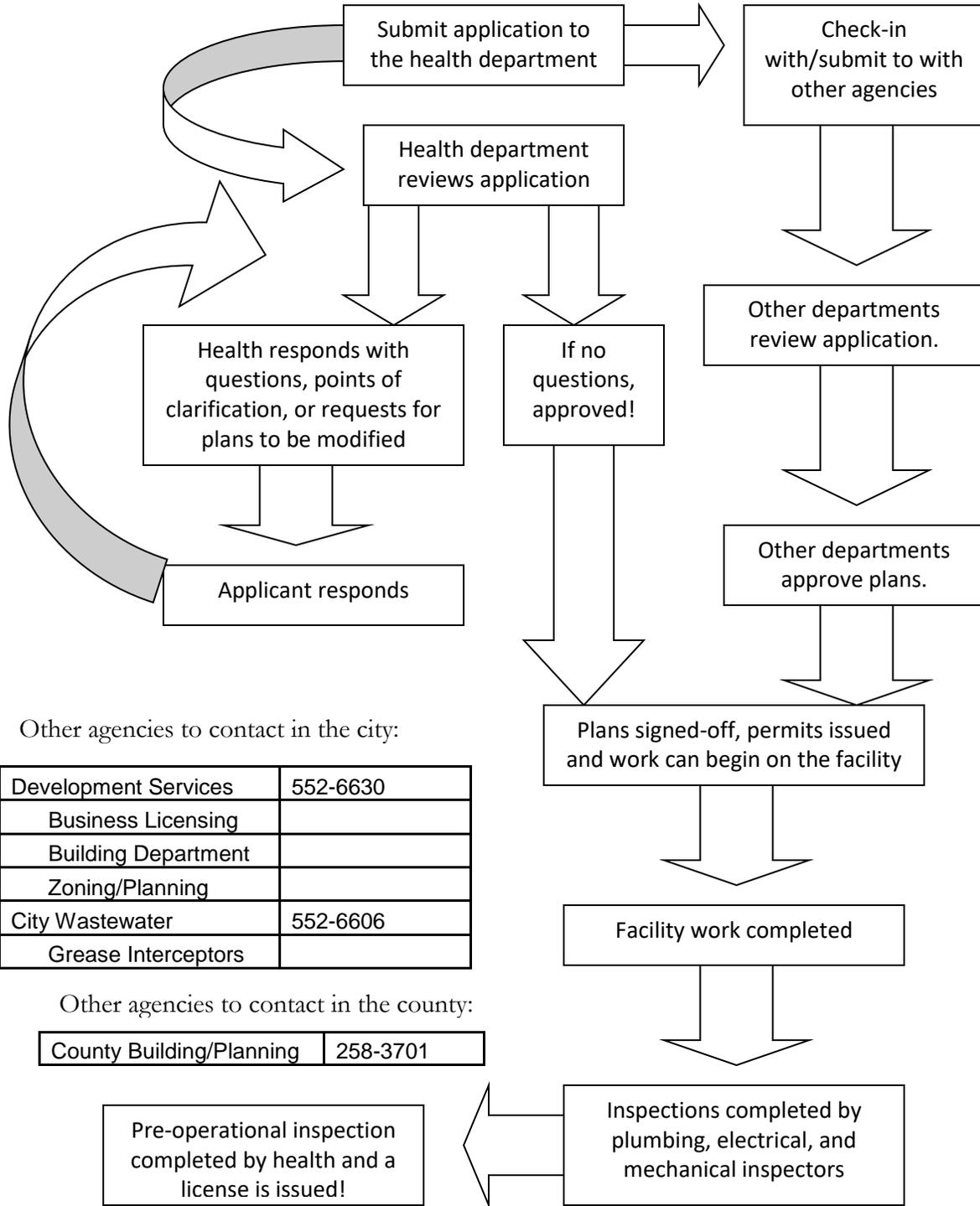
Included	N/A	
		Completed and Signed Application Form
		Floor Plan:
		Equipment Layout
		Plumbing Layout w/ Drain Types
		Hoods Labeled w/ Type
		Spec Sheets or Make/Model List
		Commissary Agreement
		Site Plan
		Water/Wastewater Information
		Menu
		Process Authority or HACCP Sheets

Intake Sanitarian: _____

Date: _____

Sanitarian Comments: _____

Process Overview



Other agencies to contact in the city:

Development Services	552-6630
Business Licensing	
Building Department	
Zoning/Planning	
City Wastewater	552-6606
Grease Interceptors	

Other agencies to contact in the county:

County Building/Planning	258-3701
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Guidelines for an Efficient Review Process

While most reviews can be completed in a of couple weeks, they may take between 30-60 days depending on staff resources and the completeness of the application submitted. To make your review process as fast and easy as possible, ensure the following:

- Turn in a complete application that is easy to read.
- Plan ahead so that the project is not delayed.
- Check-in with other agencies during the review process.
- Do not start construction or remodeling prior to getting an approval letter.
- Submit an application that reflects how you intend to operate at the time of licensing.
- Submit the final copies of your menu, floor plan, and equipment list as changes to these items may result in delays or additional fees.
- Respond quickly to questions from the reviewer.
- If something asked in the application does not apply to the operation, don't leave items blank, write N/A.

Items to Submit

- Application form, completed and signed.
- Product List
- Site plan showing parking areas, streets, dumpsters, and the septic system or well if applicable.
- Floor plan of the facility showing all sinks, hoods, and equipment. If the floor plan is not clearly labeled, an equipment schedule is required.
- Specification sheets for all food equipment. If specification sheets cannot be provided, a list of the make and model may be an adequate substitute.
- Plumbing plan showing water to each plumbed fixture as well as how wastewater will be conveyed from sinks and equipment. This plan must show locations of floor sinks, backflow prevention devices, and indicate which fixtures are indirectly connected to waste.
- Ventilation plan showing locations and types of hoods if not shown on the floor plan.
- HACCP/Special Process/Process Authority information, if applicable.

Other Licenses and Regulatory Agencies

- There are many codes that you may need to comply with including those from building, fire, wastewater, zoning, and the department of revenue. While it is not the health department's responsibility to enforce their codes, there may be instances where you cannot be approved to operate until you comply with their regulations.
- A business license is required if you operate in the City of Missoula.

Production and Process Review

Maximum number of staff per shift: _____

Hours of operation (Opening time to closing time each day):

Sun _____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____

Describe the products that you will manufacture including the process entailed, how the final product will be packaged, and how much of the product will be made at one time.

Product	Process	Packaging	Quantity

Will any of the following processes be done onsite?

Process	Yes/No	Foods Processed/Produced
Smoking for preservation		
Curing		
Additives (including acidifying)		
Reduced Oxygen Packaging		
Cook Chill (vacuum sealing cooked product into a bag and ice bathing)		
Juicing		
Seed Sprouting		
Fermentation		

Food Supplies:

Note: if sources are not easily recognized as licensed and approved, your reviewer may request additional information.

	Source	Frequency of Delivery
Meat		
Seafood		
Dairy		
Produce		
Baked Goods		
Produce		
Eggs		
Spices		

Food Storage and Protection:

	Amount of Space Available	Amount Needed Pre-Production	Amount Needed Post-Production
Dry Storage			
Refrigerated Storage			
Frozen Storage			

1. How will you ensure that storage units hold appropriate temperatures?

2. Will raw animal products be stored in the same cold units as ready-to-eat foods? _____

If so, how will cross-contamination be prevented? _____

3. Top to bottom, how will raw animal products be organized in refrigeration units: _____

4. How will food and single-service items (e.g. paper cups, food boats) be kept off of the floor?

5. Where will chemicals be stored? _____

6. Potentially hazardous or Time-Temperature Controlled for Safety foods (PHF/TCS) must be date marked after preparation or after their manufacturer's packaging has been opened. Describe the date marking system that will be used.

How long will these date marked, ready-to-eat PHF/TCS foods be stored at 41F or lower?

7. How will staff ensure proper rotation and timely discard of expired items?

8. Who will be responsible for checking deliveries to ensure that food arrives in temperature and in good condition? _____

How will staff ensure that all deliveries are checked and put away promptly after delivery (e.g. scheduling deliveries for slower times)?

Thawing:

Check here if no thawing will be done at the establishment and proceed to the next section: _____

Indicate how foods will be thawed by writing the food to be thawed next to the intended process. Then, note the equipment or sink that will be used for the chosen method.

Thawing Method	Food to be Thawed	Equipment/Sink Used
Refrigeration		
Cool Running Water		
Microwave (immediately prior to cooking)		
Cooked from Frozen		
Other (describe): _____		

Cooking:

Check here if no cooking will be done at the establishment and proceed to the next section: _____

1. What equipment will be used to cook food? _____
2. How will staff verify that foods are properly cooked? _____

Cooling:

Check here if no cooling will be done at the establishment and proceed to the next section: _____

Fill out the table on the next page indicating the types of foods that will be cooled, the anticipated amount of food to be cooled at one time, the cooling method that will be used, and which sinks or equipment will be utilized in the process.

Cooling Method	Thick Meats		Thin Meats		Thick Soups/Sauces		Thick Soups/Sauces		Rice/Noodles		Assembled foods (e.g. sandwiches)		Location: Sinks or Equipment Used
		amt		amt		amt		amt		amt		amt	
Shallow Pans													

Ice Baths													
Reduced Size													
Ice Wands													
Blast Chiller													
Other:													

- List the cooling parameters to be used: the temperatures that must be reached and how quickly those temperatures are attained. _____

Monitoring:

Indicate the types of thermometers that will be used and describe their intended use (e.g. taking grill temps, internal cooking temps).

Thermometer Type	Used? Y/N	Intended Use
Bimetallic Stemmed (Dial)		
Digital/Thermocouple		
Infrared (Laser)		

- How often will thermometers be calibrated? _____
- Describe the calibration process, including the temperature to which the thermometer will be calibrated.

- If you will use another critical control besides temperature (e.g. pH), indicate how you will monitor it and how the monitoring device will be calibrated.

Training and Management:

- Employees trained in proper food production techniques are an asset to food operations. Describe your employee training program (e.g. corporate videos, in-house training, send employees to ServSafe) _____

- Well-trained, active managers are also critical to a safe food operation. What food safety training will managers receive, and how will managers ensure that protocols are being followed? _____

3. What Active Managerial Controls and documentation is important. What documents will you maintain? These may include time-temperature logs, HACCP plans, or Standard Operating Procedures. What Active Managerial Controls that you plan to use?

Handling and Hygiene:

1. Employee cleanliness and good hygienic practices are important to food safety. Describe your policies for the following areas of concern:

Area of Concern	Policy/Requirement
Bathing/General Cleanliness	
Hair Restraint	
Fingernails—length, false nails, polish	
Jewelry on hands and arms	
Clothes/Uniform/Aprons	
Cuts/Wounds	

2. Proper exclusion of ill employees is essential in preventing the spread of foodborne illness. List the symptoms or situations for which employees will be sent home: _____

3. When will hand washing be required? _____

4. Bare hand contact with ready-to-eat items is not permitted. What barriers will be utilized when handling ready-to-eat foods? _____

General Production:

1. What produce (fruits, vegetables, herbs) will be washed before use? _____

Where will the above items be washed? _____

Are there any produce items that will not be washed? Why? _____

2. Will all components of cold assembled foods (e.g. tuna salad, chicken salad, breakfast burritos) be pre-chilled prior to assembly? _____

If not, describe how the product will be quickly chilled to 41F. _____

3. How will you minimize the amount of time that food spends in the temperature danger zone between 41F and 135F? (e.g. only work with small batches, work in cold room, cook to order only, etc.) _____

Cleaning and Sanitizing:

1. Will a three-compartment sink be provided? _____

What sanitizer will be used in the three-compartment sink? _____

If chemical, what concentration will be used? _____

If high-heat, what temperature will be used? _____

Dimensions of each compartment (length, width, depth) _____

Size of your largest dish or piece of equipment _____

Describe the manual dishwashing process that will be used. _____

Does the sink have drain boards? _____

If not, describe how sufficient dish drying space will be provided.

2. Will a dish machine be used? _____

What type of sanitizer will be used in the dish machine? _____

If chemical, what concentration will be used? _____

If high-heat, what temperature will be used? _____

Describe dish drying area _____

3. Are there any large pieces of equipment that will not fit in the three-compartment sink? _____

Are there any pieces of clean-in-place equipment or stationary equipment that need to be cleaned where they are installed? _____

Describe the cleaning and sanitizing procedure for items that are not cleaned in the dishwasher or three-compartment sink. _____

4. What surface sanitizer will be available for use throughout the day?

 5. How will staff ensure that sanitizer is at the correct concentration? _____
 6. How often will in-use items (e.g. grill line utensils, blenders, meat slicers) be washed, rinsed, and sanitized? _____
 7. Will there be a master cleaning schedule to ensure that equipment and areas that are not cleaned daily (e.g. under grill lines, hoods) are adequately maintained? _____
If so, please attach the schedule, or briefly describe how often items will get cleaned.

- If a master cleaning schedule is not in place, how will management ensure that the facility is kept clean and well maintained? _____

Delivery:

1. How will you ensure that food is protected from contamination during transport?

2. How will TCS items be kept hot or cold during transport? _____

3. What is your estimated delivery area by mileage or drive time? _____

Sampling

Check here if you do not plan on sampling foods and proceed to the facility section: _____

*** It is essential that food safety measures are in place at during sampling events the same as they would be in a permanent facility. Planning ahead is essential and your responsibility.

1. Hand washing must be available at points of food sampling. If a hand sink is not available in the area of service, you must provide a hand washing station. Describe the hand wash station that will be utilized. Restrooms are not approved hand sinks.

2. How will you handle foods during service? _____

3. How will you ensure utensils are adequately rotated? Utensils must be rotated anytime they become contaminated or have been in use for four hours. _____

4. How will you keep food above 135F or below 41F during transport and service? _____

5. If you plan to use time instead of temperature control, please describe your system, including how you will track time. _____

Please note that if events last longer than 4 hours (including transport, set-up, and service), mechanical refrigeration or hot holding equipment may be required.

6. What items will be reheated onsite? _____
How will you reheat foods onsite? _____

7. What items be cooked onsite? _____
What cooking equipment will be used? _____

8. What kind of sanitizer will you have onsite? _____

I understand that proper set up at the event site is crucial to safe food service. I also understand that my retail catering license only applies to onsite events at my establishment location or offsite events under contract for a set amount of goods or services.

X _____
(signature of applicant)

Statement:

I hereby certify that the information included in this application, including the attached floor plans, equipment lists, and the menu are correct. I understand that any deviation from the submitted information may incur additional review fees and may delay approval. In addition, I understand that changes made after an approval letter is issued without prior permission of the health department may nullify the approval for this review.

By submitting this signed application, I acknowledge that the process may take 30 to 60 days and that applications are reviewed in the order that they are received. I further acknowledge that it is my responsibility to contact other regulatory agencies and that an approval letter issued from the health department does not indicate compliance with any other code, law, or regulation that may apply whether federal, state, or local. It also does not constitute endorsement or acceptance of the completed establishment (structure or equipment). I understand that a pre-operational inspection of the establishment to assess functional equipment, sinks, and other fixtures is required to determine compliance with wholesale regulations, and that before a facility can operate, a wholesale food license must be issued.

Signature of Responsible Representative: _____

Printed Name of Representative: _____

Date: _____