



CONSUMER HEALTH SERVICES PLAN REVIEW PACKET

All facilities must be inspected and licensed prior to operation. Submitting this form does not give permission to open or operate an establishment.

To ensure a timely review, the following documents shall be submitted to the department for approval at least 30 days prior to construction

1. Completed Plan Review Packet
2. One complete set of floor plans, drawn to scale, showing layout of equipment and mechanical systems. Refer to Ch. 2, Sec. 7 of the Wyoming Food Safety Rule or Ch. 2 of the Wyoming Pool Rule
3. Refer to specific plan review packet for additional requested information

Once the plan review packet has been approved, a pre-opening inspection shall be completed, license application completed and fees paid to Wyoming Department of Agriculture before a license will be issued. A license fee of \$100.00 will be required at time of licensing. Please make checks payable to: **Wyoming Department of Agriculture Consumer Health Services Section.**

Area inspector contact information and entire written regulations can be found at <http://wyagric.state.wy.us/divisions/chs>, or by contacting the Consumer Health Services Division of the Wyoming Department of Agriculture at 307-777-7211.

Mark All That Apply:

- | | |
|---|--|
| <input type="checkbox"/> New construction | <input type="checkbox"/> Change of type of operation |
| <input type="checkbox"/> Conversion of an existing building | <input type="checkbox"/> Change of ownership |
| <input type="checkbox"/> Remodeling | <input type="checkbox"/> Requested by regulatory authority |

Applicant's printed name & title:

Applicant's signature

date of signature

Date Plan Review Submitted: _____ **Anticipated Opening Date:** _____



GENERAL INFORMATION							
TYPE OF ESTABLISHMENT (CHECK ALL THAT APPLY)							
<input type="checkbox"/> Aquatic Features	<input type="checkbox"/> Bulk Water	<input type="checkbox"/> Dairy	<input type="checkbox"/> Dietary Supplement	<input type="checkbox"/> Manufactured Food	<input type="checkbox"/> Meat Plant	<input type="checkbox"/> Mobile Unit or Push Cart	<input type="checkbox"/> Retail Food
Name of Establishment:					Phone:		
Address:					Cell:		
City:					Fax:		
State/Zip:				Email:			
County:							
Website:							
OWNERSHIP INFORMATION							
Individual Name:					Phone:		
Title:					Cell:		
Corporate Name:					Fax::		
Mailing Address:							
City:					Zip:		
State:				Email:			
Form of Organization:				Date formed and state where incorporated:			
<input type="checkbox"/> Individual <input type="checkbox"/> Association <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other entity:							
ON-SITE CONTACT INFORMATION (<input type="checkbox"/> CHECK IF SAME AS ABOVE)							
Name of Primary Contact					Phone:		
Address:					Cell:		
City/State:				Zip:			
Additional contact/title:				Phone:			
Additional contact/title:				Phone:			
DAYS AND HOUSE OF OPERATION							
Days	<input type="checkbox"/> Sun	<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat
Hours	to	to	to	to	to	to	to



MONTHS OF OPERATIONS

<input type="checkbox"/>											
Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec

If a seasonal operation or irregular hours will occur, please explain:

ADDITIONAL COMMENTS

FOR OFFICE USE ONLY

Date Plan Review Received:

Plan Review Received by: _____

Date Plan was Reviewed:

Approved: _____

Denied: _____

Comments:



Consumer Health Services

Retail Food Facility Plan Review

This Plan Review is designed to be used by the retail food establishment applicant/operator to make sure essential areas have been addressed/included in the plans submitted. It is not an all-inclusive list for the specific needs of each facility operator. In addition to this Plan Review additional content may be requested. Additional information and guidance can be found at <https://wyagric.state.wy.us/divisions/chs/food-safety> . Plan Review must be submitted at least 60 days in advance of new construction or remodeling.

Below is a checklist of required information needed to complete the plan review.
Please ensure all information is included.
 Lack of complete information will delay review and plan approval.

<input type="checkbox"/>	Menu	<input type="checkbox"/>	Table 6: Mechanical Warewashing
<input type="checkbox"/>	Table 1: Food Handling Procedures	<input type="checkbox"/>	Table 7: Equipment Schedule
<input type="checkbox"/>	Floor Plan/Equipment Layout	<input type="checkbox"/>	Table 8: Refrigeration/Freezer Capacities
<input type="checkbox"/>	Table 2: Finish Schedule	<input type="checkbox"/>	Table 9: Hot Holding Units
<input type="checkbox"/>	Table 3: Ventilation	<input type="checkbox"/>	Water Supply Information
<input type="checkbox"/>	Equipment Specifications	<input type="checkbox"/>	Table 10: Water Heater
<input type="checkbox"/>	Table 4: Plumbing/Fixtures	<input type="checkbox"/>	Wastewater Information
	Table 5: Manual Warewashing		Employee Training

Section 1: Type of Operation

1. Food Process

- a. Check the type of food process that will be performed at the facility:
- Prepackaged: Prepackaged Foods
 - Process 1: Food preparation with no cook step; **receive> store> prepare> hold> serve**
 - Process 2: Preparation for Same Day Service; **receive> store> prepare> cook> hold> serve**
 - Process 3: Complex process; **receive> store> prepare> cook> cool> reheat> hot> hold> serve**

2. Menu

- a. Attach a complete menu. *Changes in menu in the future will need to be reviewed and approved.*
- b. Will food items be cooked to order or served undercooked? Yes No
 If yes, explain where or show on menu where consumer advisory state will be located:

3. Bare Hand Contact

- a. How will bare hand contact with ready-to-eat foods be minimized during preparation? Check all that apply:
- Utensils
 - Gloves
 - Deli Tissue
 - Other

4. Food Handling Procedures

- a. Complete Table 1: Food Handling Procedures. Indicate if food handling procedure will be done and the location of the food handling procedure.

Table 1: Food Handling Procedure				
Food Handling Procedure	Yes	No	Location	Method
Will produce be washed?	<input type="checkbox"/>	<input type="checkbox"/>		
Will frozen foods be thawed?	<input type="checkbox"/>	<input type="checkbox"/>		
Will foods be prepared in advance?	<input type="checkbox"/>	<input type="checkbox"/>		
Will food be cooked?	<input type="checkbox"/>	<input type="checkbox"/>		
Will food be rapidly cooled?	<input type="checkbox"/>	<input type="checkbox"/>		
Will food be rapidly reheated?	<input type="checkbox"/>	<input type="checkbox"/>		
Will food be held hot?	<input type="checkbox"/>	<input type="checkbox"/>		
Will food be held cold?	<input type="checkbox"/>	<input type="checkbox"/>		

5. Food Safety Plans

- a. Do you have any foods that require an additional Food Safety plan or a variance request or HACCP Plan? (Example: holding sushi rice (acidified) between 41F and 134F for more than four hours or using time as a control, Curing, Reduced Oxygen Packing(ROP), smoking for preservation) Yes No
If yes, list foods below and submit a Variance/HACCP request, plans and logs.

Section 2: Floor Plan/Finish Schedule

1. Submit a floor plan drawn to scale that includes the location and identification of all equipment, plumbing fixtures and storage areas, including but not limited to the items listed below. **Note: All equipment related to the operation must be of commercial design that is certified or classified for sanitation by an American National Standards Institute (ANSI) certification program or design that is approved by the Department.*

- | | |
|---|--|
| <input type="checkbox"/> Handwashing sinks | <input type="checkbox"/> Ventilation |
| <input type="checkbox"/> Food preparation sinks | <input type="checkbox"/> Water heater |
| <input type="checkbox"/> Warewashing sinks | <input type="checkbox"/> Spare equipment |
| <input type="checkbox"/> Mop sink | <input type="checkbox"/> Tools |
| <input type="checkbox"/> Storage area | <input type="checkbox"/> Drainage pipes |
| <input type="checkbox"/> Refrigeration units | <input type="checkbox"/> Outdoor cooking equipment |
| <input type="checkbox"/> Hot Holding units | <input type="checkbox"/> Restrooms |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |

Section 3: Facility/Equipment Specifications

- Complete Table 4 below for all facility related equipment or fixtures that require plumbing. Indicate how equipment or fixtures will be indirectly drained (e.g. floor sink, air gap, or air break), directly connected to the sewer, and/or what method of backflow prevention will be used, if applicable. If additional equipment is provided, please specify in the table below.

Table 4: Plumbing Equipment/Fixtures				
ID # on Plan	Fixture or Equipment	Number	Indirect/Direct Drainage	Method of Backflow Prevention
	3-Compartment Sink			
	Automatic Dishwashing Machine			
	Garbage Disposals			
	Handwashing Sinks			
	Food Preparation Sinks			
	Refrigeration Units			
	Ice Bins/Machines			
	Mop/Utility Sink			
	Chemical Dispensing Units			
	Spray Hoses			
	Walk-in Coolers			
	Walk-in Freezers			
	Fountain Soda Machine			
	Other:			
	Other:			

2. Warewashing

- Manual Warewashing– Include the size of each compartment (length x width x depth) of the warewashing sinks, soiled and clean drain board lengths, and whether or not a pre-rinse spray hose will be installed for each warewashing area. The largest piece of equipment including pots and pans must be able to be fully submerged into the 3-compartment sink.

Table 5: Manual Warewashing Information					
ID # on Plans	Length (inches) of Soiled Drainboard	Dimensions (inches) of Sink Compartments (LxWxD)	Length (inches) of Clean Drainboard	Pre-Rinse Sprayer Yes/No	Drain Type

- b. Mechanical – Provide make and model numbers and attach specification sheets for each warewashing machine. Please indicate if the machine is heat or chemical sanitizing. Indicate soiled and clean drainboard length, whether or not a pre-rinse spray hose will be used, utensil soak sink dimension.

Table 6: Mechanical Warewashing Information					
Make	Model #	Heat/ Chemical Sanitizing	Drainboard Length (inches)	Pre-Rinse Yes/No	Utensil Soak Sink Dimensions (inches)(LxWxH)

- c. Will alternate equipment or methods be used in place of traditional drain boards? Yes No
If yes, indicate the methods that will be used:

- d. How will mechanical warewashing machine(s) be drained?

3. Shelving & Storage

- a. How many and what type of shelves will be in refrigeration cooler and freezer/s?
**Note: wood is not allowed on surfaces in the cooler or freezer.*

- b. How many and what type of shelves will be used in dry storage?
**Note: all food shall be stored at least 6" off the floor.*

- c. Where will chemicals be stored?

- d. Where will employees store personal belongings?

- e. Where will linens and wiping clothes be laundered?

4. Pest Control

- a. Please explain how you will prevent pests from entering, how you will monitor, and what actions you will take to prevent pests from entering your facility including how all outside openings (doors, window, etc) will be protected from the possible entry of pests:

- b. Provide the number of refrigeration/freezer units. Also provide capacities for refrigeration/freezer units in Table 6. **All cold holding equipment must be commercial NSF certified equipment. Provide specification sheets for all cold holding units and condensation units being used in walk-in type coolers and freezer.**

Table 8: Refrigeration/Freezer Capacities			
Type of Unit	# of Units	Total Cubic Feet	Drain Type
Walk-in Cooler			
Walk-in Freezer			
Reach-in Cooler			
Reach-in Freezer			
Blast Chiller			
Retail Display			
Refrigeration Built-in			
Refrigeration Free Standing			
Other:			
Other:			

- c. Provide the type and number of hot hold units. **All hot holding equipment must be commercial NSF certified equipment. Provide specification sheets for all hot holding units being used.**

Table 9: Hot Holding Units	
Type of Unit	# of Units
Steam Tables	
Hot Box	
Cook and Hold Units	
Other:	
Other:	
Other:	
Other:	

7. Salad Bar/Buffer

- a. Will buffet/salad bar have sneeze guards? Yes No

- b. Describe how facility will facilitate safe salad bar/buffet operations?

Section 4: Water and Sewer Supply

1. Hot Water

- a. Provide the following water heater information in Table 5. Please attach specification sheets. If more than one water heater is to be installed, please indicate which plumbing fixtures each heater or system will service.

Table 10: Water Heater			
Make	Model #	Capacity (Gallons)	Water Temperature

2. Water Supply

- a. Where will water be supplied from?

- Municipality
 Community Water System*
 Private Well*

**Water must be sampled every six months. Results must be kept in establishment file. Please attach approval from State Engineer's office.*

3. Waste Water Disposal

- a. How will sewage be disposed of?

- Municipality
 Septic

** Please attach septic/grey water disposal approval from State DEQ.*

4. Grease Trap

- a. What size is the grease trap(s)?

- b. Location of grease trap(s)?

5. Cooler and Freezer Drains

- a. Where will coolers and freezers drain?

Section 7: Consumer Health Services Basic Requirements for Food Service Establishments

The following list of items includes basic requirements for a food service establishment to be licensed under the State of Wyoming Statutes and the Wyoming Food Safety Rule. This list is not all inclusive but notes the major items for the average restaurant or food service operation. This list includes operation practices as well as minimum equipment standards.

1. Plans and specifications, drawn to scale and showing equipment, must be submitted to the Department for approval 30 days before construction begins.
2. All food must be from an approved source. Milk shall be pasteurized and must be dispensed via individual cartons or from an approved bulk type dispenser.
3. There shall be adequate reach-in/walk-in refrigeration and freezer storage for all cold foods.
4. There shall be adequate facilities to maintain hot foods, i.e. steam tables, hot holding cabinets, bain-marie, etc.
5. Crock pots or any equipment designed for home use is not approved for commercial food preparation.
6. Thermometers shall be provided and conspicuous in all cold storage units. A metal stem thermometer with a minimum range of 0-220°F shall be available to check food temperatures.
7. There shall be adequate storage facilities for dry and canned foods, as well as single service items, etc. 8. Ice must be from an approved source and all storage bins must be properly covered or protected and indirectly drained.
8. Ice must be from an approved source and all storage bins must be properly covered or protected and indirectly drained.
9. Sneeze guards are required on all serving lines, salad bars, etc.
10. It is recommended, all equipment be National Sanitation Foundation (NSF) or equivalent in construction and installation.
11. Cooling plates or tubes must be properly located on drink dispensers.
12. Contact paper is not approved for shelving in storage or food preparation areas.
13. At minimum, a three compartment sink with drain boards, utensil racks, or tables on each end shall be provided. Additionally a commercial type dishwasher can be utilized for the cleaning and sanitizing of utensils. Either installation requires an indirect drain on the equipment.
14. Hot water dishwashing machines must have a booster heater to maintain 180°F water temperature at the manifold of the dish machine. Additionally, hot water, or low temperature, chemical sanitizing dish machine may be installed. Either shall be commercial grade. Low temperature, chemical sanitizing dish machines may be installed, if desired. Dish machines must be commercial grade.
15. Food contact wiping cloths must be stored in a sanitized solution between use for kitchen, dining room and bar.
16. All hand washing sinks shall be provided with hot and cold water tempered by means of a mixing valve or combination faucet.
17. Hand washing sinks shall be installed to allow convenient use by employees in food preparation, food dispensing, and ware washing areas and in, or immediately adjacent to toilet rooms.
18. Restrooms shall have self-closing doors, mechanical vents vented to the outside of the building, and smooth, nonabsorbent, easily cleanable floors and walls.
19. Outside garbage facilities shall be properly located and maintained.
20. All outer openings to the establishment shall be protected (screened) and have self-closing, tight fitting doors.
21. Floor coverings, walls and ceilings in all food preparation, storage, and utensil washing areas shall be light colored, smooth, nonabsorbent and easily cleanable.
22. Light fixtures in all food preparation, storage and utensil washing areas shall be shielded or utilize shatterproof type bulbs.

23. All grease generating cooking equipment shall be located under a commercial grade hood with washable grease filters, properly shielded lights, and a fire suppression system approved by the fire marshal.
24. Facilities shall be available for the storage of personal items such as clothing and purses so they are not stored with food or food utensils.
25. Toxic items such as insecticides, rodenticides, caustics, cleaning items, and medicines shall be stored separately from food and food utensils.
26. A service/mop sink or curbed cleaning facility with a floor drain is required in all facilities.
27. Mops, brooms and other cleaning or maintenance equipment must be properly stored.
28. Outside premises shall be maintained free of litter and unnecessary material.
29. Laundry facilities in a food service establishment are not allowed in the food preparation or utensil washing areas and shall be installed in a location that does not add to contamination of food, equipment or supplies.
30. Clean and soiled linen shall be stored separately and in proper containers.
31. Food preparation sinks shall be indirectly drained.
32. If a private non-public water supply is utilized, semiannual bacteriological tests are required.
33. A public water system under EPA requirements must be tested quarterly for coliform bacteria and annually for nitrates.
34. A permit from the State Engineer's Office is required when drilling a water well for a private water system in a food service establishment.
35. A private wastewater disposal system for a food service establishment must have a Department of Environmental Quality (DEQ) permit, be adequately sized for the proposed operation, and constructed according to submitted plans.
36. Check with city and/or county planning and zoning offices for local requirements and building permits.
37. Food Processes
 - a. **Process 1-** Foods represented by process 1 undergo no cooking at the retail level before being consumed. Examples of these kinds of foods are deli meats, cheeses and other pasteurized dairy products. Raw, RTE like sashimi, raw oysters and salads are grouped in this category.
 - b. **Process 2-** In this food preparation process, food passes through the danger zone only once in the retail or foodservice facility before it is served or sold to the consumer. Food is usually cooked and held hot until served (e.g., fried chicken), but can also be cooked and served immediately.
 - c. **Process 3-** Foods prepared in large volumes or in advance for next day service usually follow an extended process flow. These foods pass through the temperature danger zone more than one time; thus, the potential for the growth of spore-forming or toxigenic bacteria is greater in this process.

PLEASE SUBMIT ALL INFORMATION TO YOUR AREA CHS INSPECTOR:

**FAILURE TO SUBMIT THE REQUESTED INFORMATION COMPLETELY MAY DELAY THE PLAN APPROVAL PROCESS AND ISSUANCE OF A FOOD LICENSE.*

In addition to specifically requested information or documents, ensure the following are submitted for ALL establishments:

1. Completed Plan Review Packet
2. One complete set of floor plans, drawn to scale, showing layout of equipment and mechanical systems. Refer to Ch. 2, Sec. 7 of WFSR
3. Specifications on equipment (including shelving) showing NSF or equivalent approvals

FEE Schedule:

An initial fee of **\$100.00** will be due by check or cash at time of licensing

Annual renewal fee is **\$50.00**

Checks may be made to *Wyoming Department of Agriculture, Consumer Health Services*