

**MADISON COUNTY HEALTH DEPARTMENT**  
**806 WEST COLLEGE**  
**FREDERICKTOWN, MISSOURI 63645**  
**573-783-2747 / 573-783-8039**  
 madisoncountyhealth.us



## PLAN REVIEW APPLICATION

Fill out the following review form and submit it with the plans and fee to the Madison County Health Department office for approval. Check all appropriate boxes in the right columns, fill in the required information in the center column and list corresponding page number from the plans in the left column.

Name of Establishment: \_\_\_\_\_

Address of Establishment: \_\_\_\_\_

Type of Establishment: Restaurant Deli Grocery Caterer Retail School Tavern Mobile Bakery Senior Center Institution

1. Kitchen	Yes	No	N/A
Are hand sinks provided at all food prep areas?			
Do the hand sinks provide hot water with a temp. of at least 110F?			
Plumbing pressurized/hand sink has a single mixing faucet?			
Is a separate food prep/culinary sink required?			
Are all food prep and culinary sinks indirectly drained?			
Does the hood system cover all the cooking and frying surfaces?			
Is a grease interceptor required? Provide type and size in gallons.			
Are sewage lines exposed overhead in food preparation areas?			
Is the three compartment sink or commercial dish washer sized correctly?			
If there is a bar area- is there a hand sink and 3 compartment sink installed?			
Is a mop sink/service sink provided in a convenient location away from food service?			

<b>2. Storage Area</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Is adequate shelving provided to store all items needed?			
Is the shelving in good repair and easily cleanable /non-absorbent?	E		
Are any sewer lines exposed overhead in the storage area?			
Is an outside storage area provided? If yes, list the purpose.			
<b>3. Dish Area</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Is a three compartment sink Provided?			
Is the three compartment sink connected to a grease trap/or interceptor?			
Is a dishwasher provided? If so, is it chemical or heat sanitizing?			
Are toxic items stored properly in Dish Area?			
<b>4. Restrooms</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Are Public restrooms provided?			
Are employee restrooms provided?			
Do the sinks have mixing faucets with hot and cold running water under pressure that reach 110 degrees F?			
Are the restrooms ventilated to the outside?			
<b>5. Floors/Walls/Ceilings</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Are floor materials grease resistant and easily cleanable in all food preparation, storage, restroom, dish and wait station areas?			
Are the walls and ceilings light in color, smooth, easily cleanable, and non-absorbent in all food prep, storage, restroom, dish and wait station areas?			
Is the floor/wall juncture coved in all food, storage, restroom, dish and wait station areas?			

Are drop ceiling tiles in good repair and not stained from leaks?			
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<b>6. Lighting</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Are 50 foot candles of light provided over all food prep areas and 20 foot candles provided over all dish and storage areas?			
Are all light fixtures properly shielded in all food preparation and food storage areas?			
Are lights shielded in all areas that contain food prep or soft package food storage and dining areas?			
<b>7. Solid Waste Disposal</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Is an outdoor garbage area provided?			
Is a grease dumpster provided if needed?			
Is the outside garbage area easily cleanable and located on a concrete, crushed rock or asphalt pad?			
<b>8. Insect and Rodent Control</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Will all outside doors be self-closing and rodent proof?			
Are the placement of electrocution devices and vector control boxes be identified on the plan?			
Will all pipes and electrical conduit chases be sealed; ventilations systems, exhaust and intakes protected?			
<b>9. Water Supply</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Is the water supply from an approved source?			
Is the water supply PUBLIC ( ) OR PRIVATE ( )			
If private, has the source been approved? Please attach a copy of written approval (DNR and water sampling results)			
<b>10. Sewage Disposal</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Is the building connected to a municipal sewer? If No, is private disposal approved: Yes / No Please attach copy of written approval			

<b>11. THE FOLLOWING DOCUMENTS ARE REQUIRED</b>	<b>Yes</b>	<b>No</b>
Proposed Menu		
Plan drawn of food establishment showing location of equipment, plumbing, electrical services, and mechanical ventilation. (Blue Prints do not have to be engineered with P.E. seal, but if you already have them I will request a copy).		
Equipment Schedule		

<b>Finish Schedule (walls, floors, bases, ceilings)</b>		
<b>12. CONTENTS AND FORMAT OF PLANS AND SPECIFICATIONS</b>	<b>YES</b>	<b>NO</b>
Show the location and when requested elevated drawings of all food equipment. Each piece of equipment must be clearly labeled on the plan with its common name. Submit drawings of self-service hot and cold holding units with sneeze guards.		
Designate clearly on the plan equipment for adequate rapid cooling, including ice baths, ice paddles, refrigeration, hot holding potentially hazardous foods.		
Provide room sizes on the floor plan.		
Show location of sinks throughout kitchen, bathrooms, waitress stations and bar areas if applicable.		