Fee: \$200.00



## Town of Somers Department of Health

600 Main St. Somers, CT 06071 (860) 763-8216

## FOOD ESTABLISHMENT PLAN REVIEW APPLICATION

New Remodel Conversion				
Name of Proposed Establishment:				
Establishment Address:	_			
Date Submitted to the Health Department:				
Applicant(s) Name and Phone:	_			
Applicant(s) Mailing Address:				
Applicant(s) Email:				
Does the Applicant Own or Rent the Building?:				
If the Building is Rented Please Fill Out Below:				
Owner(s) Name:	ų			
Owner(s) Mailing Addresses and Phone:				
Owner(s) Email:				
The following is a list of requirements needed for your application to be processed:				
☐ Plan review fee of \$200.00.				
☐ Proposed plans must be submitted for review and approval by other departments. All applicable permits shall be issued prior to the start of work.				
☐ An Engineered site plan showing location of business in the building, location of building on site, parking and location of any outside facilities, (enclosed dumpsters, walk-ins, etc.).				

An Engineered floor plan drawn to scale $(1/4" = 1")$ of the facility showing location of all equipment, plumbing, electrical services, mechanical ventilation and seating capacity.			
Manufacturer Specification sheets for each piece of equipment shown on the floor plan. All equipment must be NSF approved, non-commercial equipment is unacceptable. All equipment is to be mounted a minimum of 6" off the floor or on wheels.			
Submit a proposed menu. Menu must include a consumer advisory; applicable items must be noted.			
What meals are being served?			
Breakfast LunchDinner			
Proof of adequate sewage disposal facilities. If the property is served by public sewers, approval of the Somers Water Pollution Control Authority, SWPCA must be obtained. If the establishment is served by a subsurface system, potentially including a below grade grease trap, an inspection report must be submitted to ensure they are working properly.			
All surfaces must be smooth, non-absorbent, and easily cleanable. Please note all of the finishes (floors and walls) for preparation areas, warewashing areas, storage rooms, toilet facilities, dining rooms, and bar area. Unprotected wood is not allowed in food preparation areas, inside the walk-ins, warewashing areas etc. Cove base molding is required between the wall and floor juncture.			
Include the proper documentation for the CFPM (Certified Food Protection Manager), if the establishment is a class 2, 3, or 4.			
Connection to a Public Water System, or if the property is to be served by a well, approval of the State of Connecticut, Dept. of Public Health for a Non-Community Public Water Supply. If the establishment is served by a well, a water analysis is required quarterly. It is the applicant's responsibility to provide the quarterly water report to the Somers Health Department.			
Hand sinks are required in all food preparation areas, dispensing areas, bar area, toilet rooms, and warewashing areas.			
Label floor drains; if applicable. If floor drains cannot be provided due to site conditions, indicate how cleaning will be accomplished.			
Label storage areas for dishes, utensils, and pots and pans.			
Indicate the type of ice machine: water cooled or air cooled.			
If you will be preparing baked goods from scratch (cake, cookies, bread, pizza crusts, donuts etc.) you will need to obtain a bakery license from the Department of Consumer Protection. If you have a soft serve dessert (ice cream) machine, you			

will also need a permit from the Department of Consumer Protection, they may be reached at (860) 713-6160.		
Indicate the type of commercial dish machine: chemical or hot water.		
Provide a 3-bay sink for washing of pots and pans, include a wire rack above for air drying. The sink must be large enough to fit your largest piece of equipment.		
Supply an area for employees to store personal belongings. If employees are required to change into a uniform, a changing area is required.		
Indicate a designated area away from food preparation where toxic items will be stored.		
Supply a floor mounted mop sink and hangers above the sink to hang wet mops and broom storage.		
Include a lighting schedule, lights in all preparation areas must be shatterproof or have appropriate covers.		
Minimum lighting requirements:		
food prep/kitchen toilet and storage rooms walk-in's	50-foot candles of light 20-foot candles of light 10- foot candles of light	
Proper backflow devices must be installed on sinks, hose outlets, carbonators, mop sinks, dishwasher and spray equipment.		
Provide the size of the water heater which shall be appropriately sized for the restaurant's needs.		
An application for a Food Service License must be completed and submitted to the Health Department with the appropriate fee before you can obtain a license.		
Final inspection is prior to licensing. All dust generating equipment must not be present during the inspection. No tempered food orders are permitted prior to the inspection.		
Changes to the floor plan, la approved in advanced.	ayout, equipment list, and/or finishes must be	