

Town of Somers
Department of Health
600 Main St.
Somers, CT 06071
(860) 763-8216

Fee: \$200.00

FOOD ESTABLISHMENT PLAN REVIEW APPLICATION

New _____ Remodel _____ Conversion _____

Name of Proposed
Establishment: _____

Address: _____

Owner: _____

Mailing Address: _____

Business Phone: _____ Home Phone: _____ Email: _____

Applicant: _____

Mailing Address: _____

Business Phone: _____ Home Phone: _____ Email: _____

The following documentation must be submitted with your application:

- An Engineered site plan showing location of business in the building, location of building on site, parking and location of any outside facilities, (dumpsters, walkins, etc.).
- 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.
- 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.
- Floor plan drawn to scale of the facility showing location of all equipment, plumbing, electrical services, mechanical ventilation and seating capacity (see attached).
- Manufacturer Specification sheets for each piece of equipment shown on the floor plan.
- Proposed menu.