

## **Plan Submittal Checklist**

County of Orange, Health Care Agency, Environmental Health 1241 E. Dyer Rd., Ste. 120, Santa Ana, CA 92705 (714) 433-6074

The intent of this form is to assist in determining the acceptability of the proposed plans for official review and is NOT a substitute for a full and detailed review by a Plan Check Specialist.

Plans accepted for plan check review. SR
Facility Name
Address
Contact Name and Phone Number
Preferred Method to Receive Letters
Date
FOD OFFICE LISE ONLY
FOR OFFICE USE ONLY
Unpackaged Food Facility Criteria:
Y N N/A Criteria
☐ ☐ ☐ ☐ Three identical sets of plans
☐ │ ☐ │ Floor plan drawn to scale, readable, and in ink
☐ ☐ ☐ Previous floor plan (remodels only)
☐ ☐ ☐ All equipment drawn on floor plan
☐ ☐ ☐ ☐ ☐ Equipment schedule with make and model numbers of all equipment
☐ ☐ ☐ ☐ Complete finish schedule for all areas
☐ ☐ ☐ ☐ Menu (For new construction and large remodels only)
☐ ☐ Storage – 32 linear feet of 3-tier ANSI certified shelving units. Based on
size and type of operation, additional shelving may be required.
☐ ☐ Change room or lockers
☐ ☐ ☐ Detailed exhaust hood drawings, including elevations and CFMs
3-Compartment sink with dual integral drainboards and floor sink
☐ ☐ Handwash sink
☐ ☐ Prep sink with floor sink (For new construction and when applicable)
☐ ☐ Mop sink
☐ ☐ Water heater location and proposed energy input
☐ ☐ Employee restroom(s)
□ □ Public restroom(s)
Packaged Food Facility Criteria:
Y N N/A Criteria
Three identical sets of plans.
☐ ☐ Floor plan drawn to scale, readable, and in ink
Previous floor plan (remodels only)
All equipment drawn on floor plan
Equipment schedule with make and model numbers of all equipment
Finish schedule
Storage – 16 linear feet of 3-tier shelving units.
☐ ☐ ☐ Mop sink
☐ ☐ ☐ Water heater location and proposed energy input
Comments:
Proliminary chacker
Preliminary checker