

CASS COUNTY, MISSOURI

HEALTH DEPARTMENT • ENVIRONMENTAL DIVISION
300 SOUTH MAIN STREET
HARRISONVILLE, MISSOURI 64701
(816) 380-8425 • FAX (816) 380-8450
WWW.CASSCOUNTY.COM/HEALTH



Public Health
Prevent. Promote. Protect.

FOOD ESTABLISHMENT APPLICATION FORM

Fee Schedule: No Application will be accepted without payment received when submitted.

Place check mark next to fee submitted.

Cass County Food Establishment Application Fee (Must be paid at time of submission):

___ \$300 allows up to 14 business days for application to be reviewed.

Cass County Yearly Operating Fees (Due at time of risk assessment completion)

___ \$200 Low Risk

___ \$300 Medium Risk

___ \$400 High Risk

Please fill out the FOOD SERVICE COMPLEXITY SURVEY at the end of this application

Contact CCHD business office **816-380-8425** to arrange payment.

****Warning:** Failure to complete any questions on this application in its entirety will result in the delay of your pre-opening inspection.

SUBMISSION of application DOES NOT guarantee immediate approval.

Review Process:

1. Complete and Submit application with applicable fee. **No** construction or altering of premises is permitted until Approval letter and Construction Permit have been issued.
2. Application will be reviewed within timeframe as requested upon date of receipt.
 - If application is incomplete/ additional information is requested, Non-Approval letter will be issued requesting specific information. Review process is suspended until applicant reply is received.
 - If application is complete/ applicant's reply to non-approval letter is accepted, Approval letter and Construction Permit will be issued.
3. Applicant or representative must contact CCHD Environmental Services to schedule a pre-opening inspection approximately 5 days prior to anticipated opening date. Facility must be ready to open; all construction must be complete.

Additional Documents

HACCP (Hazard Analysis of Critical Control Points) documentation must be provided for applicant operators who intend to conduct special processes. Example: sous vide, reduced oxygen packaging including canning, acidified foods including sushi, fermentation, and smoking for preserving (not flavoring)

Mobile Units (Food Trucks) must provide a Commissary Agreement and copy of Commissaries latest inspection report.

If you have any questions regarding this form, please contact the Health Department prior to submission.

NAME OF ESTABLISHMENT:
ADDRESS OF ESTABLISHMENT:
Email/Phone number (Please provide at least one contact method):

What kind of Plan Review are you applying for?

- New
 Remodel
 Conversion
 Change of Ownership

Category:

- Restaurant
 Convenience Store
 Grocery Store
 Mobile Food Truck
- Other: _____

Billing:

Business Owner: _____

Mailing Address: _____

Invoice Billing Address: _____

Telephone: _____

Email: _____

Applicant's Name: _____

Title (owner, architect, etc.): _____

Mailing Address: _____

Telephone: _____

Email: _____

Fax Number: _____

I have submitted plans/applications with the following authorities on the following dates:

Codes/Zoning: ____/____/____ Fire Dept: ____/____/____

My plans/applications have been approved by these authorities:

- Codes/Zoning
 Fire
 Department

Projected dates of construction: ____/____/____ to ____/____/____

Maximum occupancy: _____ Number of staff per shift (estimation): _____

Projected opening date: ____/____/____

Is the establishment open all year? YES NO

*If NO please list **OPENING** date each year: _____ & **CLOSING** date each year: _____

Projected hours of operation:

Hours	Monday	Tuesday	Wednesday	Thursday	Friday	Sunday	Saturday
Open							
Close							

Type of service provided (check all that apply)

- Sit down
 Take Out
 Caterer
 Mobile Vender
 Other
 Buffet
 Drive-Thru
 Delivery

How many meals do you estimate you will be serving for each meal (If only serving certain meals please cross out the ones you will **not** be serving)

- If applying to open a mobile food establishment, please see information located at the end of this application.

Meal	Breakfast	Lunch	Dinner	Curbside	Carry Out	TOTAL
Estimated # of meals						

What type of food will you be serving? (Check all that apply)

- | | | | | |
|--|---|---|--|---|
| <input type="checkbox"/> Bar and Grill | <input type="checkbox"/> Seafood | <input type="checkbox"/> Greek | <input type="checkbox"/> Thai | <input type="checkbox"/> Health Food |
| <input type="checkbox"/> Deli | <input type="checkbox"/> Steak | <input type="checkbox"/> German | <input type="checkbox"/> Sushi | <input type="checkbox"/> Contiental Breakfast |
| <input type="checkbox"/> Cajun | <input type="checkbox"/> Kosher | <input type="checkbox"/> French | <input type="checkbox"/> Bar/Alcohol only | <input type="checkbox"/> Breakfast |
| <input type="checkbox"/> Hamburgers | <input type="checkbox"/> Vegetarian | <input type="checkbox"/> Middle Eastern | <input type="checkbox"/> Cofee/Tea | <input type="checkbox"/> Salad Bar |
| <input type="checkbox"/> Pizza | <input type="checkbox"/> Mexican | <input type="checkbox"/> Korean | <input type="checkbox"/> Brew pub | <input type="checkbox"/> Baked Goods |
| <input type="checkbox"/> Barbeque | <input type="checkbox"/> Italian | <input type="checkbox"/> Indian | <input type="checkbox"/> Pre-packaged food | <input type="checkbox"/> Dessert |
| <input type="checkbox"/> Chicken | <input type="checkbox"/> Japanese | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Family Style | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Push Cart | <input type="checkbox"/> Mobile Food Unit | <input type="checkbox"/> Ice Cream Shop | <input type="checkbox"/> Candy Shop | |

*OTHER: _____

Please list the types of material used throughout the construction process.

The finishes of the floors and ceilings in food establishments shall be smooth, durable, and easily cleanable. They must be non-absorbent in areas exposed to moisture. Floor and wall junctures shall be covered. Applicant must indicate which materials (example: tile, stainless steel, paint, etc.) will be used in which of the following areas:

Kitchen:	YES	NO	N/A
Are handwashing sinks provided in all food prep areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do handwashing sinks provide water of 110°F or higher?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is there a separate food prep sink/culinary sink? (Designated handwashing, 3-basin used for dishwashing, mop wastewater sinks may <u>NOT</u> be used for food prep)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If a hood system is required, does it cover all cooking surfaces & fryer equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is a grease trap or grease interceptor provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are any sewer lines exposed in food preparation areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Bar:	YES	NO	N/A
Is a three-compartment sink provided at the bar?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is a hand sink provided at the bar?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the hand sink provide hot water with a temperature of at least 110°F?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are any sewer lines exposed in the bar area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Storage:	YES	NO	N/A
Is shelving adequate to properly store all items needed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are any sewer lines exposed in any storage areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is an outside storage area provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Will employee's personal belongings be separate from food/linens served to guest?</p> <p>(Note: All employee's belongings, such as lunches, must be stored separate and labeled from food to be used for establishment use. All bags and other belongings must be separate from lines used for establishment use)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Dish Area:	YES	NO	N/A
<p>Is a three-compartment sink provided with drain boards?</p> <p>(Note: This is mandatory in establishments that clean food utensils/equipment even if a dish washer is provided *4-301.12)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is a dishwasher provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If a dishwasher is provided, does it sanitize by using heat at minimum of 160°F?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>If a dishwasher is provided does it sanitize by using chemicals? *</p> <p>If yes please list the chemical:</p> <p>_____</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Is a hand-washing sink provided at the dishwashing area that provides hot water with a temperature of 110°F?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are any sewer lines exposed overhead in the dishwashing area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Restrooms:	YES	NO	N/A
Are public restrooms provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are employee restrooms provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do the hand sinks provide a water temperature of at least 110°F?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do the restrooms have self-closing doors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are restrooms ventilated to outside air?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Mop Sink/ Chemical Area:	YES	NO	N/A
Is a mop sink provided with hot and cold running water?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the mop sink located away from food prep areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Solid Waste Disposal:	YES	NO	N/A
Is an outdoor garbage disposal area provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is a grease dumpster provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the outdoor garbage area easily cleanable and located on asphalt or concrete?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are outdoor garbage disposals covered with a sturdy lid?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Bussing Stations:	YES	NO	N/A
Are hand sinks provided at the bussing stations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do the hand sinks provide hot water at a temperature of at least 110°F?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floors/Walls/Ceilings:	YES	NO	N/A
Are floor materials grease resistant and easily cleanable in all food preparation areas, storage areas, restrooms, dish areas, and wait stations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are the walls and ceilings light in color, smooth, easily cleanable, and non-absorbent in all food preparation areas, storage areas, restrooms, dish areas, and wait stations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are the floor/wall junctures covered in all food preparation areas, storage areas, restrooms, dish areas, and wait stations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Lighting:	YES	NO	N/A
Are 50 foot candles (way of measuring distance of light output) provided over all food preparation areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are 20 foot candles provided over all dishwashing /storage/hand washing/ and restroom areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are all light fixtures properly shielded in all food preparation and food storage areas?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Equipment:	YES	NO	N/A
Does the plans include a list of all food equipment (keyed), with the name and model number?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is all food equipment commercial grade and <u>NSF (National Sanitization Foundation)</u> approved? *Home grade equipment is not approved for commercial use and can not be used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is an adequate commercial hot water heater provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Menu:	YES	NO	N/A
Has a copy of the establishment menu been submitted (REQUIRED)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Insect & Rodent Control:	YES	NO	N/A
Will all outside doors be self-closing and rodent proof?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the placement of electrocution devices identified in the plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the area around the facility clear of unnecessary brush/litter/boxes and other harborage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sewage Disposal:	YES	NO	N/A
Is the building connected to a municipal sewer? *If no, is a private disposal system provided YES/NO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Water Supply:	YES	NO	N/A
Is water supply from an approved source Public _____ Private _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If private has the source been approved *Note written approval and/or permit must be attached	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FOLLOWING DOCUMENTS ARE REQUIRED:	YES	NO	N/A
*Please check the box to confirm they are included. Failure to do so may result in an automatic non-approval letter until received			
Proposed Menu	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manufacturer information sheets showing specifications for each piece of equipment shown in the plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Site plan that shows location of business in the building, location of building showing streets and alley ways, and location of outside equipment (Example: dumpsters, storage, septic tank, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan drawn to scale of food establishment showing location of equipment, plumbing, electrical services, and mechanical ventilation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Contents and Format of Plans and Specifications:	YES	NO	N/A
Provide plans that are a minimum of 11 x 14 inches in size including the layout of the floor plan accurately drawn to a minimum scale of 1/4 inch = 1 foot. * This is to allow for ease in reading the plans.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Label and locate separate food preparation sinks when the menu dictates to prevent contamination and cross-contamination of raw and ready to eat foods.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clearly designate hand washing sinks for each toilet fixture <u>and</u> in all areas of food preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provide room size, aisle space, space between and behind equipment as well as the placement of the equipment on the floor plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On the plan, represent supporting areas such as storage rooms, garbage rooms, toilets, basements, and / or cellars use for storage or food preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Include and provide specifications for:

- A. Entrances, exits, loading/unloading areas and docks.
- B. Complete finish schedules for each room including floors walls, ceilings, and covered junctures bases.
- C. Plumbing schedules including location of drains, floor sinks, water supply lines, overhead waste lines, hot water tanks, backflow prevention, and wastewater line connections.
- D. Lighting schedule with shields;
 - a. At least 110 lux (10 foot candles) at a distance of 75 cm (30 inches) above the floor, in walk-in refrigeration units and dry food storage areas and in other areas and rooms during periods of cleaning;
 - b. At least 220 lux (20 foot candles):
 - c. At a surface where food is provided for consumer self-service such as buffets and salad bars or where fresh produce or packaged foods are sold or offered for consumption;
 - d. Inside equipment such as reach-in and under-counter refrigerators;
 - e. At a distance of 75 cm (30 inches) above the floor in areas used for handwashing, ware washing, and equipment and utensil storage, and in toilet rooms; and
- E. Food Equipment schedule to include make and model numbers and listing of equipment that is certified or classified for sanitation by an ANSI accredited certification program (when applicable).
- F. Source of water supply and method of sewage disposal. Provide the location of these facilities and submit evidence that state and local regulations are complied with; Ventilation schedule for each room, mop sink or curbed cleaning facility with facilities for hanging wet mops, garbage can washing area/facility, cabinets for storing toxic chemicals, rooms utilized by employees (such as locker areas, employee bathrooms, etc.)

Comments/Questions: _____

MOBILE FOOD VENDORS

- All mobile food vendors must meet requirements above for both commissaries and mobile food establishments, as well as having the following additional requirements:

	YES	NO	N/A
A designated place of commissary for food storage and potable water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unit fully enclosed with overhead protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<p>Waste retention tank that is 15 percent larger than waste water supply tank. Sloped to drain, properly disposed to sanitary disposal.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Potable water tank: Adequate water supply must be from an approved public water source. Hoses constructed with approved food-contact material, installed to prevent backflow, hoses and connections handled and stored so that no contamination is created.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Food Service Complexity Survey

Potentially Hazardous Foods (PHF) are foods that are temperature dependent for preventing food borne illness germ growth. If they are not maintained refrigerated or hot they have the ability to allow uncontrolled germ growth

Potentially Hazardous Food is a term used by food safety organizations to classify foods that require time-temperature control to keep them safe for human consumption. A PHF is a food that:

- Contains moisture - usually regarded as a water activity greater than 0.85
- Contains protein (Example: chicken/beef/fish/etc.)
- Is neutral to slightly acidic - typically having a pH between 4.6 and 7.5 (Example: salsa/pickles/homemade coleslaw etc.)

In order to accurately determine the risk priority of the establishment the following questions must be answered and submitted with the application. The priority rating determines the minimum number of annual inspections and permit fee. *Please be accurate completing survey.

1. Are potentially hazardous food (PHF) items served? **See definition above	Y(1.5) N(0.5)
2. Are PHF prepared only in individual portions? (An item not from a batch, only 1 item prepared at a time. Ex. Cooked to order steaks)	Y(0.5) N(1.5)
3. Are PHF served from a buffet or salad bar?	Y(1.5) N(1.0)
4. Are PHF carried over? Ex. Prepared for multiple (2-6) days service	Y(1.5) N(0.5)
5. Are PHF prepared from raw non-frozen ingredients?	Y(1.5) N(1.0)
6. Are PHF prepared and held before service? *Maintained on a hot table or cold wells	Y(1.5) N(0.5)
7. Are PHF processed extensively with multiple steps in preparation? Ex. Smoking, fermenting	Y(1.5) N(0.5)
8. Is a critical population served? Ex. Long term care facility, school, immune compromised, etc.	Y(1.5) N(0.5)
9. What is the average number of meals or patrons served per day?	1 – 150 (0.5) 151 – 400 (1.0) 400 plus (1.5)

Total Points _____ Divide by 9 _____

Results <0.9 Low Priority 0.9 to 1.1 Medium Priority >1.1 High Priority

Do NOT write below this line (for Health Department use only)

DATE: FEE PAID:	REVIEWED BY: SIGNATURE:
APPROVED NOT APPROVED	PERMIT NUMBER LETTER SENT DATE:

Approval of these plans and specification by the Cass County Health Department, Environmental Health Services Program; does not indicate compliance with any other code, law, or regulation that may be required - federal, state, or local. It further does not constitute endorsement or acceptance of the completed establishment (structure or equipment). Pre-opening inspection of the establishment with equipment in place and operational will be necessary to determine if it complies with local and state laws governing food service establishments.