

FARMINGTON VALLEY HEALTH DISTRICT FOOD SERVICE PLAN REVIEW GUIDELINES & APPLICATIONS



The Farmington Valley Health District requires that all plans for proposed food service operations be submitted to this office for review. This helps ensure that the proposed equipment, the layout, menu, and floor/wall finishes meets public health code requirements **before** the start of construction.

Following the plan review and the completion of construction, the Farmington Valley Health District will conduct a preopening inspection of the facility. At that time, a possible future inspection schedule will be discussed. This schedule will vary for each facility based on the menu, clientele served, and inspection history.

We hope that you find the enclosed materials helpful in your planning. Please do not hesitate to contact this office should you have any questions regarding the planning of your facility.

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FVHD FARMINGTON VALLEY HEALTH DISTRICT

95 RIVER ROAD SUITE C CANTON, CONNECTICUT 06019 TELEPHONE (860) 352-2333 FAX (860) 352-2542

PROPOSED FOOD SERVICE FACILITY REQUIREMENTS

The following information must be submitted to the Farmington Valley Health District for all proposed food service facilities:

1. A plan review application and a food service permit application and the required fees.
(See attached fee schedule)
2. A complete set of facility plans including an equipment layout of all areas, plumbing plans, and electrical plans.
3. Details regarding finishes for floors, walks, and ceilings in all areas.
4. Cut sheets and specifications for all equipment verifying NSF® approval.
5. A copy of the proposed menu.
6. If the facility is served by a private well, a water analysis verifying the water potability (a list of water testing labs is enclosed).

In addition, please note the following:

1. If the proposed facility is served by a septic system, the system may need evaluation by an engineer to ensure that it is suitable for the proposed use.
2. You must contact the town's Building Inspector, Fire Marshal, Zoning Official, Town Engineer, and if applicable, the Water Pollution Control Authority, regarding their requirements.
3. You must contact the CT Department of Consumer Protection, Foods Division, at (860) 713-6160 if baked goods will be manufactured in the facility.
4. In the case that the proposed facility will be located in a private home, an equipped kitchen separate from that for home use is required.

5. A minimum of one handwash sink is required to be accessible in areas that include: food preparation areas, food dispensing areas, and warewashing areas.

6. CT Public Health Code and Farmington Valley Health District Food Service Regulations require that a Qualified Food Operator (QFO) and a Certified Designated Alternate be employed in all facilities that serve hot potentially hazardous foods to the public. This certification can be obtained through an approved testing organization (*list enclosed*) or in part, by attending a Farmington Valley Health District Seminar. Contact out office at 676-1953 for a current seminar schedule.

In 1997, there were changes in the Connecticut Public Health Code that affected food service facilities. One change concerned the frequency of inspections by Health Departments. Before 1999, all facilities were inspected every three months. Now, a facility's menu and extent of foodhandling determine how often it is inspected.

There are four categories or "classifications" of facilities that determine the inspection frequency. They are:

<u>Class</u>	<u>Type of Menu</u>
Class I	Commercially prepackaged foods Hot and Cold Beverages Non-potentially hazardous foods
Inspection frequency	Once per year (minimum)

Class II	Cold potentially hazardous foods Hot dogs, kielbasa, and commercially precooked soups, must be served within four hours.
Inspection Frequency	Twice per year (minimum)

Class III	Hot potentially hazardous foods. Must be served within four hours.
Inspection Frequency	Three times per year (minimum)

Class IV	Hot potentially hazardous foods. Served four or more hours after heating.
Inspection Frequency	Four times per year (minimum).

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FEE SCHEDULE – EFFECTIVE FEBRUARY 8, 2005

Annual Permit Fee

CLASS I		\$100
CLASS II		\$125
CLASS III		
	0-99 SEATS	\$225
	100 > SEATS	\$250
CLASS IV		
	0-99 SEATS	\$275
	100 - 199 SEATS	\$325
	200 > SEATS	\$375
SUPERMARKET LARGER THAN 10,000 SQ.F T.		\$125.00 FOR CLASS I / II \$225.00 FOR CLAS III / IV

- ❖ FOOD SERVICE PLAN REVIEW FEE TO BE THE SAME AMOUNT AS THE ANNUAL FOOD SERVICE PERMIT FEE FOR THE CLASS OF THE PROPOSED ESTABLISHMENT.

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FEE : _____

DATE: _____

FOOD SERVICE PLAN REVIEW APPLICATION

FACILITY NAME _____

ADDRESS _____

IS THIS A RENOVATION OR A NEW BUILDING? _____

IS THIS BUILDING SERVED BY:

PUBLIC SEWER _____ PUBLIC WATER _____

SEPTIC SYSTEM _____ WELL WATER _____

PROPOSED NUMBER OF SEATS _____ PROPOSED CLASS _____

List all persons to receive correspondence

1. OWNER _____

ADDRESS _____

Town & Zip

PHONE _____ FAX# _____ Email _____

2. APPLICANT IF OTHER THAN OWNER _____

MAILING ADDRESS _____

Town & Zip

PHONE _____ FAX# _____ Email _____

3. ANY OTHERS TO RECEIVE CORRESPONDENCE

NAME _____ NAME _____

ADDRESS _____ ADDRESS _____

TOWN/ZIP _____ TOWN/ZIP _____

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WELL WATER TESTING REQUIREMENTS!!

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The Connecticut Department of Public Health, through the action of the Connecticut General Assembly, adopted requirements for testing well water. Specifically, the requirements are:

1. ALL water samples must be collected by an individual under the direction of a licensed laboratory, a state certified operator as defined in Section 25327a(c) of the regulations of state agencies, or a licensed sanitarian;
2. The well water MUST meet the maximum contaminant levels (MCL'S) of the Connecticut Public Health Code;
3. The water has to be analyzed for:

- | | |
|----------------------------|--|
| a. Total Coliform bacteria | j. pH |
| b. Nitrate | k. Sulfate |
| c. Nitrite | l. Apparent Color |
| d. Sodium | m. Odor |
| e. Chloride | n. Volatile Organic Chemicals (VOC'S) |
| f. Iron | o. Seven listed pesticides, if
the nitrate level is over 10.0 |
| g. Manganese | |
| h. Hardness | |
| i. Turbidity | |

- ❖ When the results are mailed or faxed to the Farmington Valley Health District, a Water Certification Form with signature of the person who took the sample must be included. This is a State Regulation.

APPROVED LOCAL WATER TESTING LABORATORIES

Averill Environmental Laboratory
100 Northwest Drive
Plainville, CT 06062
860 7470 676

Vallid Labs
295 Silver Street
Agawam, MA
413 789 2206

Torrington Laboratory
339 Main Street
Torrington, CT 06790
860 496 8378

Envirotech Laboratory
77 Cook Hill Road
Windsor, CT 06095
860 688 7249

Northeast Laboratories
129 Mill Street
Berlin, CT 06037
860 828 9787

QUALIFIED FOOD OPERATOR
APPROVED TESTING ORGANIZATIONS

ServSafe®

The Educational Foundation of the National Restaurant Association (NRA)

Phone: 1-800-765-2122

Website: www.nraef.org

175 West Jackson, Suite 1500

Chicago, IL 60604

Thomson Prometric

(formerly Experior Assessments, National Assessment Institute, Chauncey, and Educational Testing Service)

Phone: 1-800-786-3926

Website: www.experioronline.com/food.htm

1260 Energy Lane

St. Paul, MN 55108

National Registry of Food Safety Professionals/Environmental Health Testing

Phone: 1-800-446-0257

1-407-352-3830

Fax: 1-407-352-3603

Website: www.NRFSP.com

5728 Major Blvd.

Suite 750

Orlando, FL 32819

****Not Currently Approved, but certificates obtained prior to 2003 are acceptable:***

Certifying Board for Dietary Managers

Phone: 1-800-323-1908

Fax: 1-630-587-6308

Website: www.dmaonline.org

406 Surrey Woods Drive

St. Charles, Illinois 60174-2386