FOOD FACILITY PLAN REQUIREMENTS  
PC-1 Form

Name of Establishment: ____________________________________________________________

Owner of Establishment: _________________________________________________________

Physical Address of Establishment: ______________________________________________

Contact Person for Plan Check: _________________________________________________

Mailing Address: _______________________________________________________________

Telephone Number: ______________________________________________________________

Email Address: _________________________________________________________________

<table>
<thead>
<tr>
<th>MONTEREY COUNTY OFFICE USE</th>
</tr>
</thead>
<tbody>
<tr>
<td>SR00______________________</td>
</tr>
<tr>
<td>AR:_______________________</td>
</tr>
<tr>
<td>Received by:_______________</td>
</tr>
<tr>
<td>Date Paid:_______________</td>
</tr>
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<td>IN:_______________________</td>
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<tr>
<td>Check #:_______________</td>
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<tr>
<td>Amount Paid: $____________</td>
</tr>
</tbody>
</table>

Review Completed on: ___________ (Date)  By: ______________________

☐ Approved  ☐ Rejected  ☐ Revision Requested

Comments: ________________________________________________________________


Salinas Office
1270 Natividad Road
Salinas, CA 93906
831-755-4505

Monterey Office
1200 Aguajito Road, Suite 007
Monterey, CA 93940
831-647-7654

King City Office
200 Broadway Ave, Suite 70
King City, CA 93930
831-386-6899

Website: www.mtyhd.org/CH

CHPS PC-1 (Rev. 5/2020)
Introduction

The purpose of this document is to provide you with assistance in the opening of a new food facility or remodeling an existing food facility. The procedures and the information contained are intended to assist you in a step-by-step manner and to provide a checklist of items necessary for a successful plan check process from initial plan submittal to the final plan check inspection.

Who needs to submit plans?

Food facilities that are built from the ground up, from existing building spaces, tenant improvements (TI) and existing food facilities that remodel, change equipment or their menu, are required by the California Retail Food Code to have plans submitted to the Environmental Health Bureau (EHB). The Consumer Health Protection Services program performs the review of the plans. They will also conduct construction inspections while your facility is being built as needed and grant the final approval for the facility to open for operation once the work is complete.

When are the plans submitted?

 Plans must be submitted and approved prior to the start of construction. After this Department has approved your plans, you will also have to obtain approvals from the local building department. By law, an EHB plan approval may be needed before the local building department or the local Fire Marshall will approve your plans. The use of approved materials and good workmanship are significant factors in the evaluation and final field approval of food facility construction and equipment installation. A properly constructed facility enhances cleanability and operation. It also lessens the necessity for early repair or replacement of equipment or structure.

What codes do we enforce?

EHB inspects and enforces the California Retail Food Code, the California Plumbing Code, and the California Mechanical Code.

How do you contact us and where are we located?

We are located at:
- Salinas Office - 1270 Natividad Road, Salinas, CA 93906 - (831) 755-4505
- Monterey Office - 1200 Aguajito Road, Suite 007, Monterey, CA 93940 - (831) 647-7654
- King City Office - 200 Broadway Ave, Suite 70, King City, CA 93930 - (831) 386-6899
Plan Submittal and Inspections

Submittal and Inspection Process

A flow chart of this process is depicted on Page 5.

1. Submittal- Submit all required plans, documents, and items to this department. See Plan Submittal Requirements section for items to be submitted. Twenty (20) business days are given by state law to review plans.

2. Significant Corrections- If our initial review shows that additional information is required or if changes must be made, you will be contacted by telephone or sent a detailed letter that outlines the needed information or required corrections. It is your responsibility to gather that information or make the required corrections to the drawings, if required, as quickly as possible.

3. Approval- Congratulations, your plans have been approved! Once approved, two sets of the plans will be available for pick up at our office within 10 business days, or they will be recycled. The specialist from the department who will be conducting the construction inspections will retain the third stamped set at the office. One of EHB’s returned stamped plan sets must be kept at the site for reference to health code requirements during construction. Inspected plan sets, once approved or those needing correction, will be retained for a maximum of one (1) year after the date of notification to the submitter.

4. Revision- Once approved, changes to the plans require plan resubmission and payment of a revision fee. Changes involving environmental health code matters must be approved prior to implementing the changes.

5. Re-stamp- Approved plans expire 1 year from the date the plans were approved by this department or 1 year from the last EHB construction inspection. Expired plans will be voided, and new plans must be resubmitted for review. Re-stamps are done with a counter appointment, for a fee. Plans to be re-stamped must be identical to the approved set; any changes or additions to the plans will result in the submittal of revised sets.

6. Consultation- For plan check items that are more minor in nature, such as change of owner with the same menu or catering commissary approvals, a consultation with an inspector must be requested and fees may apply depending on scope of work. The consultation can also be requested prior to submitting plans or purchasing a facility to inform the operator of all the items that will need to be corrected. The plan check consultation does not guarantee that plan submittal may not be required if the facility is not up to current code, or for other reasons. A consultation can also be conducted at the office, by appointment, to answer questions.
7. **Inspections** - Up to 2 construction inspections of the facility are conducted by the EHB inspector after plans have been approved. More than 2 inspections will require additional inspection fees. Construction inspections must be scheduled at least 5-10 business days in advance of the desired day of inspection. The person on the job site most directly responsible for the facility construction should be the person calling for the construction inspection appointments. Maintain at minimum one set of the EHB approved stamped set of plans on the job site to be used during EHB construction inspections. An application for the annual operational EHB health permit must be submitted to EHB by final inspection. The different types of inspections are as follows:

a. **Pre-Final Inspection** - This *optional* inspection is completed prior to the final inspection. The inspector will check to see if the facility was built per the stamped health plans. During the Pre-Final inspection, the approval to stock the facility or train employees may be granted if occupancy or temporary occupancy has been granted by the building and fire officials. All equipment requested to be used prior to final inspection must be acceptable by all applicable agencies.

b. **Final Inspection** - This *mandatory* final inspection will be conducted after you have finished all construction and the local building and fire officials have granted their final approval or Temporary Certificate of Occupancy (TCO) for your opening. Proof of these approvals must be on the job site (e.g., final sign off on respective "job cards", etc.). *The EHB Final Approval cannot be granted without these approvals.* A permit application must be submitted by the final inspection, and the annual permit fee shall be paid prior to opening.

All utilities (electric, gas, and potable water) must be available and operational for the final inspection, including hot and cold water to all fixtures as needed, the hood-exhaust system, refrigerators, and warewashing machines. The facility must be thoroughly cleaned and ready to operate. Hand sinks must be stocked with soap and paper towels in dispensers. It is vital that everything in your facility is functioning properly. Scheduling the final inspection well in advance of the proposed opening date facilitates the preparation for opening on time.

The California Retail Food Code requires an owner or employee to have a current **Food Safety Manager Certification**. The individual(s) with the Food Manager Certification should be the Person in Charge (PIC) of the kitchen operation and available during business hours. Schedule this food safety training prior to calling for approval to open. All employees who handle food, beverage, or food contact surfaces must obtain a valid food handler card or in-house certification test within 30 days of employment. *See Page 6 for a complete Food Facility Final Inspection Checklist to help you successfully open on time.*
Food Facility Plan Check Flow Chart

Scope of Work
New food facility, tenant improvement, remodel of existing permitted facility, menu/process change, new or modified equipment

Submittal
Submit application and respective review fees with 3 sets of plans, menu, equipment specification/cut sheets, and material samples. Ensure that plans contain a clearly stated scope of work

Plan Review

Corrections Required?

No

Yes

Revised plans must be submitted reflecting the corrections indicated in the plan review comments.

Corrections Required

No Further Corrections Required

Plans Approved

Construction Begins

Mid-Construction Inspection (optional)

Apply for Health Permit

Final Inspection (REQUIRED)

Facility is approved to operate

Inspections

Minor Remodel Projects

Application Process

*All plan review and field inspections are conducted with the same Specialist where possible.
This checklist will help you prepare for your final plan check inspection. Ensure that the items listed below are completed and can be verified during inspection. Remember to contact your inspector or EHB office at least 5-10 business days prior to the anticipated final inspection date to secure your appointment.

✓ Check the following items as you complete them

☐ APPROVED CONSTRUCTION: All construction was completed according to the plans approved by the Environmental Health Bureau (EHB).

☐ OBTAINED NECESSARY APPROVALS: Final or Temporary Certificate of Occupancy from local Building Authority and Fire Department (if required).

☐ PLANS AVAILABLE FOR INSPECTION: An approved set of EHB-stamped plans is available for final inspection.

☐ EQUIPMENT OPERABLE: All approved equipment is in place, can be turned on, and operates properly.

☐ REFRIGERATION EQUIPMENT: All refrigeration equipment is at 41°F or below and it is equipped with a valid thermometer. Freezers are operating at freezing temperatures.

☐ HOT & WARM WATER: Hot water of 120°F is available at all sinks and warm water from 100°F-108°F is available at all hand sinks.

☐ HAND SINKS STOCKED: All hand sinks are stocked with handwashing soap and paper towels in dispensers.

☐ WAREWASHING SINK STOCKED: Warewashing sink is stocked with detergent soap, sanitizer, and a testing method to measure the sanitizer.

☐ BACKFLOW DEVICES INSTALLED: Devices are installed between the potable water supply and the piece of equipment. Certifications are provided for review for testable backflows.

☐ CERTIFIED PERSON IN CHARGE (PIC): PIC has a valid Food Safety Manager Certification.

☐ FOODHANDLER TRAINING: All employees have obtained a Food Handler card or completed in-house test within 30 days of hire.

☐ CLEANLINESS: The facility is clean and free from vermin.

Failure to complete the above items may prevent you from obtaining final approval for your project or require rescheduling of the final inspection. For additional questions on how to prepare for your final inspection, please call EHB office at (831) 755-4505.
Plan Submittal Requirements

Below is a checklist of the documentation and items that will need to be submitted with the plans.

1. **Application** - Complete and submit the plan check application. Ensure that all information is legible, and the correct contact person is identified for the plan notification status.

2. **Menu** - Submit a complete menu detailing all food and beverage items for sale separate from the plans. If your menu changes regularly or seasonally, submit a representative menu with the types of food or beverage for sale. The food or beverage items listed on the menu determine what type and how much equipment is required.

3. **Fees** - Fees are charged for the review of the plans and are based upon the scope of work proposed. This fee includes up to 2 inspections performed during construction of the facility. The plan review fee does not include the Annual EHB Health Permit, which is separate and must be applied for prior to opening.

4. **Specification sheets** - Submit specification or cut sheets for equipment that clearly show the certification or classification for sanitization and electrical standards by an American National Standards Institute (ANSI) accredited certification program such as National Sanitation Foundation (NSF), Underwriters Laboratory (UL), Edison Testing Laboratory (ETL), etc.

5. **Samples** - Samples of materials for surfaces such as the floor, walls, or ceiling may be required to be submitted to determine properties such as durability, cleanability, or smoothness.

6. **Standard Operating Procedures (SOPs)** - SOPs may be required as part of the plan submission, particularly if the facility is doing a specialized process, requires a Hazard Analysis Critical Control Point (HACCP) plan, is a Satellite Food Facility or other circumstances deemed necessary by the department. Using acidification or water activity to prevent the growth of pathogenic organisms or packaging potentially hazardous foods using a reduced oxygen packaging (ROP) method will require that HACCP plans be submitted to the State of California, Department of Public Health for approval. See page 37 for more details.

7. **Plans** - 3 identical complete sets of the plans, completed in a professional and legible manner and drawn to a state scale, are needed to stamp. The list of items, which are considered to constitute a complete set of plans and specifications, are listed under "Food Facility Plan Check Checklist."

The plans must comply with the following items and must be documented on the plans:

- **Number of sets** - 3 sets of plans must be submitted prior to obtaining final approval.

- **Plan size** - A food facility designer or consultant, draftsman, contractor, architect or owner may prepare the plans. The plans must be drawn in ink, in a professional manner, to a scale which is indicated on the plans (e.g., ¼ inch=1 foot, ½ inch=1 foot, etc.)

- **Facility information** - Provide the name and address of the food facility.

- **Owner information** - Provide the name, telephone number, and email of the owner, contractor, and contact person.
**Water information** - Provide the sewer and water district the facility is served by or by a water well. If water provided to the food facility is from a water well, and/or the facility is connected to a sub-surface sewage disposal system, then an approval for their use, including design and testing, shall be obtained from the Environmental Health Review Services program prior to plan approval.

**Facility size** - Provide the total square footage of the facility.

**Type of facility** - Indicate the type of food facility (e.g., 100% pre-packaged food, restaurant-single service disposable utensils, restaurant-multi service utensils, bar only, bakery, etc.) on the plans.

**Employees** - Indicate the number of employees per shift including managers.

**Site map** - Include a site map of the facility and the surrounding area. Include the location of the trash area if exterior to the facility and any remote storage areas. State if the facility is within a food court or is using communal restrooms.

**Floor plan** - Include all interior and exterior doors, toilets, dressing rooms, garbage and trash areas, food preparation, dining, warewashing, office space, dressing rooms, etc. on the plans. Clearly identify all rooms. The food preparation, food storage, and scullery areas must be fully enclosed at all times.

**Equipment plan and schedule** - Provide a layout showing the proposed location of all equipment. Identify the equipment with a letter or number and provide an equipment schedule listing all equipment. The equipment schedule shall also include information such as make, model, description, electrical (KW), plumbing, gas requirements (BTU), waste method, how the equipment is installed or other pertinent information. Provide elevations showing the equipment in the proposed location and sneeze guard dimensions. All equipment must be certified for sanitation and electrical standards by an ANSI accredited agency (NSF, UL, ETL, etc.). See Page 13 for further information.

**Finish schedule** - Provide a table showing the complete finish schedule for the floors, walls, ceiling, and cove base. Indicate the type of material, the color, the surface finish and the type of integral cove base at the floor/wall juncture. Samples or cut sheets of finishes should be submitted with the plans. See Page 9 for further information.

**Plumbing plan and schedule** - Provide complete plumbing layout and isometric diagram showing sewer, waste drains, floor sinks, floor drains, grease traps or interceptors, and all water supply lines. Clearly identify make, model number, gallons, and BTU/KW of hot water heater. Show the calculations for sizing water heater. Provide a spec/cut sheet for the proposed water heater. See Page 17 for further information.

**Mechanical plans** - Provide complete mechanical plans including hood exhaust ventilation system layout and room ventilation (e.g., restroom). Indicate the type of hood specified for the particular cooking equipment being ventilated. Provide elevations showing proposed cooking equipment under the ventilation hoods. If the hood is U.L. listed, provide mechanical plans from manufacturer; or if the hood is custom, provide all measurements and formulas used. See Page 25 for further information.

**Electrical plan** - See Page 30 for information relative to environmental health electrical/lighting requirements that need to be identified on the plans.

**Window and door schedule** - Provide a schedule identifying or clearly indicate on floor plans all doors and window used in the facility. See Page 7 for further information. Elevations are required showing enclosure details and dimensions for areas such as pass thru-windows, demonstration areas, and open dining room.
Specialized Food Processing Questionnaire

INDICATE WHICH OF THE FOLLOWING FOOD PROCESSING METHODS ARE USED:

☐ Reduced Oxygen Packaging (ROP)
☐ Modified Atmosphere Packaging (MAP)
☐ Vacuum packaging
☐ Sous vide
☐ Cook-chill
☐ Smoking
☐ Curing
☐ Using acidification or reducing water activity to prevent the growth of Clostridium botulinum
☐ Canning/bottling (excluding juices)
☐ Using food additives, such as vinegar, to make the food non-potentially hazardous
☐ Processing/butchering meats brought in by customers
☐ Fermenting foods/ingredients
☐ Bottling juices
☐ Storing live molluscan shellfish in water tanks
☐ Other (Example: seed sprouting):

NOTE: Equipment used for any of the above processes must meet American National Standards Institute (ANSI) standards and must be approved by this department prior to installation. (California Retail Food Code Section §114130) See the Plan Check Guidelines for additional information on equipment.

☐ I certify that this business does not use any method described above at this time and that I will notify the Monterey County Environmental Health Bureau before beginning any of the above processes in the future.

I declare under penalty of perjury that to the best of my knowledge and belief, the statements made herein are correct and true. I hereby consent to all necessary fees and inspections made pursuant to the operation of this business and for the review of these processes. I also agree to conform to all conditions, orders, and directions issued pursuant to the California Health and Safety Code.

Owner/Authorized Signature: ___________________________________________ Date: __________________________
Print Name: ___________________________________________ Position/Title: ___________________________________________
**MENU DESCRIPTION**

**Instructions:** Complete the sections below for each food item prepared or packaged using specialized process selected on pg.1.

<table>
<thead>
<tr>
<th>Description of Food (Example: Chicken Breast)</th>
<th>Specialized Process Used (Example: Sous Vide)</th>
<th>Sold at the Retail Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

Please provide a brief description of how the food item listed in the chart above is prepared:

____________________________________________________________________________________________________________________________________________________

<table>
<thead>
<tr>
<th>Description of Food (Example: Lamb Shank)</th>
<th>Specialized Process Used (Example: Smoking)</th>
<th>Sold at the Retail Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

Please provide a brief description of how the food item listed in the chart above is prepared:

____________________________________________________________________________________________________________________________________________________

<table>
<thead>
<tr>
<th>Description of Food (Example: Lobster Bisque)</th>
<th>Specialized Process Used (Example: Cook/Chill)</th>
<th>Sold at the Retail Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

Please provide a brief description of how the food item listed in the chart above is prepared:

____________________________________________________________________________________________________________________________________________________

<table>
<thead>
<tr>
<th>Description of Food (Example: Seasoned Steak)</th>
<th>Specialized Process Used (Example: ROP)</th>
<th>Sold at the Retail Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

Please provide a brief description of how the food item listed in the chart above is prepared:

____________________________________________________________________________________________________________________________________________________

**For Environmental Health Office Use Only**

Reviewed by: ________________________________ (Print) ____________________________ (Sign) Date: ____________________________
SPECIALIZED FOOD PROCESSING DEFINITIONS

Reduced Oxygen Packaging (ROP):

1. **Modified atmosphere packaging**: Replaces oxygen from packaging with nitrogen, carbon dioxide or any other gas.
2. **Vacuum packaging**: Uses a mechanical method or scavenger pack to remove air/oxygen from the packaging before or after it is sealed. This includes ingredients and final menu items, at any point during the storage, preparation, cooking or serving phases.
3. **Sous vide**: A vacuum sealed food pouch is cooked at a gentle temperature in a precisely controlled water bath.
4. **Cook-chill**: Food is cooked in a sealed food pouch and the sealed food pouch is then cooled OR hot cooked food is sealed in a container/pouch and then cooled. The food is not exposed to air during the cooling process because its packaging remained sealed.

Smoking: Liquid smoke or smoke generated from wood chips is used to preserve foods. An example of a smoked food could be smoked sausages. Smoking is often used in combination with cooking such as when making pastrami but may also include uncooked/cold smoked items like bacon.

Curing: Also called brining, corning or dry salting. The product may be soaked in a wet slurry/brine, injected with a brine solution into the meat/veins or covered/buried in dry salt. Curing also includes mixing cubed, chopped or ground meats with salt, nitrates and/or curing salts as often found when making sausages. Further examples of cured meats include salami, pancetta, sausages, chorizo, salami, bak kwa, rougan, and cured/salted fish.

Acidification or Reduction of Water Activity: This category includes bottling or canning foods and drying or adding ingredients to the food like salt or sugar to reduce the water activity. Acidification ingredients can include citric, malic or acetic acids (vinegar) or lime juice.

Using Food Additives, such as Vinegar, to make the food non-potentially hazardous: Examples can include sushi rice, salsas and sauces where vinegar is added to eliminate the need for refrigeration or steam table holding.

Processing or Butchering Meats Brought in by Customers:

**Custom Processing**: This is when a customer brings in their own animal carcass, meat, poultry or fish (i.e. deer, turkey or boar). The item may or may not be USDA approved, and the entire animal is processed to the specifications of the customer. The processed animal is then returned to the original customer for their private use.

**Fermenting Foods/Ingredients**: Commonly called pickling or fermenting. Examples include sauerkraut, kombucha, pickles and kimchi.

**Bottling Fruit Juices**: Packaging juices in advance to sell off the shelf/refrigerator whether pasteurized or not. This does not apply to juices made to order.

**Live Molluscan Shellfish Storage Tanks**: Live molluscan shellfish (oysters, mussels, clams and/or scallops) are stored in water tank or aquarium.

**Other**: Any other specialized preparation that is not listed above or that you are not sure fits in the specific categories.
CERTIFICATION OF EXEMPTION FROM HACCP PLAN FOR REDUCED-OXYGEN PACKAGING

While California Retail Food Code (CRFC), Section 114419 9(b) requires food facilities to obtain Hazard Analysis Critical Control Point (HACCP) Plan that has been approved by California Department of Public Health to engage in packaging of potentially hazardous food (PHF) using reduced-oxygen packaging (ROP), the FDA Food Code Section 3-502.12 (F) exempts food facilities from a state approved HACCP Plan when a food establishment uses a ROP method to package PHF that is always:

1. Labeled with the production time and date;
2. Held at 5°C (41°F) or less during refrigerated storage, and;
3. Removed from its package in the food establishment within 48 hours after packaging.

This application form must be submitted prior to engaging in ROP of any PHF. Be advised that additional documents may be requested. Submission of this application does not guarantee an approval.

I. FOOD FACILITY INFORMATION

<table>
<thead>
<tr>
<th>Business Name/DBA:</th>
<th>Phone:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Business Address:</th>
<th>Email:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

II. ROP METHOD(S) PROPOSED

- [ ] Vacuum packaging
- [ ] Modified atmosphere packaging
- [ ] Controlled atmosphere packaging
- [ ] Cook-chill
- [ ] Sous vide

III. LIST OF PHF TO BE PACKAGED USING ROP METHODS (Additional pages may be attached)

1.
2.
3.
4.
5.
6.

IV. EXEMPTION REQUIREMENTS:

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Agree</th>
<th>Disagree</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. All ROP foods will be labeled with the production time and date immediately after packaging.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>2. All ROP foods will be held at 41°F or less during refrigerated storage.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>3. All ROP foods will be removed from its package in the food establishment within 48 hours after packaging.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>4. Fish will only be vacuum packaged if the fish is frozen before, during, and after vacuum packaging. <em>(Fish for sous-vide that is vacuum packaged immediately before sous-vide does not have to be frozen.)</em></td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>5. Cooked, cooled Potentially Hazardous Foods (PHF) will NOT be vacuum packaged. <em>(Vacuum packaging of cooked PHF is only allowed as per the cook chill process, in which food must be placed in the oxygen barrier bag and sealed before cooking (sous vide) or placed in bag and sealed after cooking but before the product temperature falls below 135°F (cook-chill).</em></td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>
6. All PHF will be cooked per CRFC Section 114004.

<table>
<thead>
<tr>
<th>Type of Food</th>
<th>Minimum Temperature</th>
<th>Minimum Holding Time at the Specified Temperature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fruits and vegetables that are cooked for hot holding</td>
<td>135°F</td>
<td>15 seconds</td>
</tr>
<tr>
<td>Eggs for immediate service, fish, single pieces of meat (beef, pork, veal &amp; game animals)</td>
<td>145°F</td>
<td>15 seconds</td>
</tr>
<tr>
<td>Ground, comminuted or injected meats (beef, pork, lamb, veal), ratites, and raw eggs not prepared for immediate service</td>
<td>158°F</td>
<td>&lt;1 second</td>
</tr>
<tr>
<td></td>
<td>155°F</td>
<td>15 seconds</td>
</tr>
<tr>
<td></td>
<td>150°F</td>
<td>1 minute</td>
</tr>
<tr>
<td></td>
<td>145°F</td>
<td>3 minutes</td>
</tr>
<tr>
<td>Poultry, comminuted (chopped up) poultry, stuffed poultry, fish and meats, and stuffing containing meat</td>
<td>165°F</td>
<td>15 seconds</td>
</tr>
<tr>
<td>Food cooked in a microwave oven</td>
<td>165°F and hold for 2 minutes after removing from microwave</td>
<td></td>
</tr>
</tbody>
</table>

7. All PHF will be cooled per CRFC Section 114002.

(Potentially hazardous foods shall be cooled rapidly from 135°F to 41°F within 6 hours, and decrease in temperature from 135°F to 70°F shall occur within 2 hours.)

I certify that all information reported on this form is correct and true. I hereby consent to all necessary fees and inspections made pursuant to the operation of this business and for the review of these processes. I also agree to conform to all conditions, orders, and directions issued pursuant to the California Health and Safety Code, and all applicable City and County ordinances. I understand that failure to follow all exemption requirements may result in the immediate revocation of the exemption from HACCP Plan for ROP and I may be ordered to cease and desist engaging in ROP immediately.

Owner Signature  Owner Name (Print)  Date
I. Complete the following calculations for hot water demand requirements. The gallons/hour demands per fixture are available on the last page of this form.

II. List gallons/hour figures for all equipment using hot water. Assume 1-hour minimum for single service establishments and 2-hour minimum for establishments that use multi-use utensils.

<table>
<thead>
<tr>
<th>Fixture/Appliance</th>
<th>Number of sinks/compartments or appliances</th>
<th>Demand in Gallons/Hour (GPH)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Utensil sinks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Bar &amp; fountain sink</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Food prep. sinks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Garbage/wash/down area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Janitorial sinks/slab</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Handwash sinks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Prewash/Preflush</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Automatic dishwasher/ final rinse</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>TOTAL</td>
<td></td>
</tr>
</tbody>
</table>

III. Calculate usable hot water from following equation, assuming cold water temperature is 60°F. (Supply specification sheet for hot water heater)

A. Gas: 

\[ \text{BTU/Hour} = \left( \frac{\text{GPH from II} \times 8.33 \times \text{Temp. Rise}}{0.7 \text{ (efficiency)*}} \right) \]

*If spec. sheet indicates hot water heater has higher efficiency, that value may be substituted.

1. For 120°F General Purpose Water (Establishments without dishwashers):

\[ \frac{\text{BTU/Hr}}{1000} = \frac{\text{BTU/Hr}}{0.7 \text{ (efficiency)*}} \]

\[ \text{BTU/Hr} = \frac{\text{GPH from II} \times 8.33 \times 60}{0.7 \text{ (efficiency)*}} \]

2. For 140°F General Purpose Hot Water supplying dishwasher:

\[ \frac{\text{BTU/Hr}}{1000} = \frac{\text{BTU/Hr}}{0.7 \text{ (efficiency)*}} \]

\[ \text{BTU/Hr} = \frac{\text{GPH from II} \times 8.33 \times 80}{0.7 \text{ (efficiency)*}} \]

B. Electric: 

\[ \text{KW/Hour} = \frac{\text{GPH}}{6.8} \]

1. For 120°F General Purpose Hot Water (Establishments without dishwashers):

\[ \frac{\text{KW/Hr}}{1000} = \frac{\text{KW/Hr}}{5.1} \]

\[ \text{KW/Hr} = \frac{\text{GPH from II}}{6.8} \]

2. For 140°F General Purpose Hot Water (Establishments with dishwashers):

\[ \frac{\text{KW/Hr}}{1000} = \frac{\text{KW/Hr}}{5.1} \]

\[ \text{KW/Hr} = \frac{\text{GPH from II}}{5.1} \]
HOT WATER DEMANDS FOR FOOD ESTABLISHMENTS

A. General Purpose Water (140°F)

<table>
<thead>
<tr>
<th>Type</th>
<th>No. Compartments</th>
<th>Gallons per Hour</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utensil Sinks</td>
<td>1</td>
<td>25</td>
</tr>
<tr>
<td>Utensil Sinks</td>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>Utensil Sinks</td>
<td>3</td>
<td>75</td>
</tr>
<tr>
<td>Bar &amp; Fountain Sinks</td>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>Bar &amp; Fountain Sinks</td>
<td>2</td>
<td>20</td>
</tr>
<tr>
<td>Bar &amp; Fountain Sinks</td>
<td>3</td>
<td>25</td>
</tr>
<tr>
<td>Food Prep. Sinks</td>
<td>Per each</td>
<td>10</td>
</tr>
<tr>
<td>Janitorial Sinks</td>
<td>Per each</td>
<td>15</td>
</tr>
<tr>
<td>Handwashing Sinks</td>
<td>Per each</td>
<td>5</td>
</tr>
<tr>
<td>Pre-wash: (dishwashing)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Hand Spray</td>
<td>Per each</td>
<td>45</td>
</tr>
<tr>
<td>Pre-flush open type</td>
<td>Per each</td>
<td>45</td>
</tr>
<tr>
<td>Pre-flush recirculating type</td>
<td>Per each</td>
<td>40</td>
</tr>
<tr>
<td>Pre-flush closed type</td>
<td>Per each</td>
<td>240</td>
</tr>
<tr>
<td>Pre-scrapper open type</td>
<td>Per each</td>
<td>160</td>
</tr>
<tr>
<td>Garbage can wash facility</td>
<td>-</td>
<td>15</td>
</tr>
</tbody>
</table>

B. Final Rinse Requirements (180°F for Final Rinse High-Temp. Dishwashers)

<table>
<thead>
<tr>
<th>Dishwashing Machine Classification</th>
<th>GPH 20 PSI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class 1-16 x 16 Single Tank, Hood</td>
<td>69</td>
</tr>
<tr>
<td>Class 2-18 x 18 Single Tank, Hood</td>
<td>87</td>
</tr>
<tr>
<td>Class 3-20 x 20 Single Tank, Hood</td>
<td>104</td>
</tr>
<tr>
<td>Class 4-Multiple Tank Conveyor, Inclined</td>
<td>277</td>
</tr>
<tr>
<td>Class 5-Multiple Tank Conveyor, Flat</td>
<td>347</td>
</tr>
<tr>
<td>Class 6-Multiple Tank Conveyor</td>
<td>416</td>
</tr>
</tbody>
</table>

C. Low Temperature Dishwasher Requirements (Example: Auto-Chlor, Hobart, etc.)

<table>
<thead>
<tr>
<th>Rack Type</th>
<th>Water Consumption</th>
<th>GPH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single Rack</td>
<td>2.5 gal/cycle</td>
<td>100 GPH</td>
</tr>
<tr>
<td></td>
<td>1.5 min/cycle</td>
<td></td>
</tr>
<tr>
<td>Double Rack</td>
<td>2.4 gal/cycle</td>
<td>133 GPH</td>
</tr>
<tr>
<td></td>
<td>1.8 min/cycle</td>
<td></td>
</tr>
</tbody>
</table>
EXHAUST VENTILATION HOOD SYSTEM WORKSHEET PC-2

8. Provide page location(s) of floor plan showing the hood, make-up air and cooking equipment and/or dishwasher: ____________________________

*Provide at least a 6-inch overhang beyond the cooking equipment on all open sides. Note: No exposed horizontal piping within the hood canopy.

9. Provide specification sheets for each hood. For multiple hoods, identify each hood by name or number.

Hood (check applicable categories)

☐ Type I  ☐ Type II  Hood name/number: ______________________________  ☐ UL listed

Type of hood: __________________________ Size of Hood: _______ (length) x _______ (width)

Heaviest duty cooking appliance: ______________________________

CFM of exhaust hood from spec sheet: ______________________________

\[
\text{Exhaust CFM} = \text{AIRFLOW} \times \text{Length of hood}
\]

Example:

Type of hood: Non-UL listed Wall-mounted canopy  Size of hood: 14ft (length) x 6ft (width)

Heaviest duty cooking appliance: gas charbroiler (from Table 2)

Exhaust CFM = 400CFM/ft x 14ft = 5,600CFM

Grease Filters (provide engineering data/cutsheets for filters)

Manufacturer: ______________________________  Model: ______________________________


Are all filters the same size? ☐ Yes ☐ No  Number of filters used: __________

Number of blanks used: _______  Size of blanks: ______ in. X ______ in.

Operating Velocity of Filter (FPM) from spec sheet: ________________

\[
\text{Volume of Air Exhausted (CFM)} = \frac{\text{Functional surface area}}{144 \text{ sq. in.} / \text{sq. ft.}} \times (\text{Filter Area Needed}) \quad \text{Equation 1}
\]

\[
\text{Functional surface area} = \frac{\text{Volume of Air Exhausted (CFM)}}{144 \text{ sq. in.} / \text{sq. ft.}} \quad \text{Equation 2}
\]

Answer from Equation 1 = _______ (Number of filters required)

Answer from Equation 2

Makeup Air (The exhaust and makeup air systems must be connected by an electrical interlocking switch)

Manufacturer: ______________________________  Model: ______________________________

Does your makeup air provide an efficient air exchange system? ☐ Yes ☐ No

If no, provide approved method to meet required exhaust air flow: ______________________________
### Approval of a Culinary Garden Food Source for a Regulated Food Facility

#### Food Facility Identification

<table>
<thead>
<tr>
<th>Name of Facility:</th>
<th>Health Permit #:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>City</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Operator Identification

<table>
<thead>
<tr>
<th>Name:</th>
<th>Phone:</th>
<th>Address:</th>
<th>City</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(     )</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
<th>City</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Garden Location

<table>
<thead>
<tr>
<th>Address:</th>
<th>City</th>
<th>Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Introduction and Purpose

Ensuring the safety of the food supply is critical to a healthy community. Food facilities regulated under the California Retail Food Code are required to obtain their food from an “approved source” as defined in sections 113735 and 114021 of the California Health and Safety Code. The regulation of food sources helps to ensure a safe food supply.

Some on-site gardens that provide food for a single co-located regulated food facility (“culinary gardens”) are considered by the Environmental Health Bureau to be approved food sources for that food facility. The documentation of these determinations and of the considerations, underlying these determinations will help to ensure safe practices in culinary gardens.

This conditional approval is intended to ensure that the culinary garden supporting the food facility identified above is a safe source of food. The practices and standards required under this agreement are consistent with applicable standards for approved food sources and are in conformity with current public health principles and practices, and generally recognized industry standards that protect public health.

The certifications within this agreement document the food facility operator’s understanding of critical factors that play a role in preventing the biological, physical and chemical contamination of produce, and document the operator’s agreement to adhere to these minimum requirements. If the culinary garden addressed in this agreement is managed by a contractor, the operator shall require that contractor to co-sign this agreement and shall provide a copy of the cosigned agreement to EHB.

**Food grown at the above listed facility is to be used for food production at the listed food facility only unless otherwise approved.**
Food Safety at Institutional Culinary Garden

Water Quality
1. Water used for irrigation must be obtained from a public water system or well that has been tested and shown to be free from pathogens.
2. Greywater or recycled water is not a safe water source for culinary gardens.
3. Culinary gardens should be located in an area with the least potential for coming into contact with water from contaminated runoff (irrigation, rainfall, etc.)

Septic Systems
4. Gardens shall not be planted over septic systems or leach fields.

Presence of Animals
5. Efforts shall be maintained to exclude animals, including domestic animals, from the garden area. Constructing a fence around the garden may help exclude animals from the growing area.
6. Animal waste may not be used in culinary gardens. An exception is made for commercially composted manure.

Pesticides
7. Pesticides should not be applied on or around gardens without first contacting the Monterey County Agricultural Commissioner’s Office (CAC) at (831) 759-7325. Gardens claiming to be organic must register with the CAC prior to beginning operations.

Compost
8. Compost applied to culinary gardens may not contain animal fecal materials. Manure to be used on a culinary garden must be commercially processed/fully cured.

Sanitary Practices
9. Gardening and harvesting equipment must be maintained in a clean condition and stored in a sanitary location. Dedicated equipment shall be solely used in the garden and not used for other purposes on the property.
10. Vegetation at the edges of vegetable patches should be minimized to prevent harborage places for rodents and insects.
11. The grounds surrounding the garden should be maintained in a manner such that pests are not attracted to the area.

Worker Sanitation
12. Workers harvesting produce from culinary gardens must properly wash their hands before handling produce and be free of open cuts or wounds on their extremities.
13. Restroom facilities with warm water and soap must be readily accessible to anyone working in a culinary garden.
14. Workers should protect produce from cross-contamination by ensuring contaminated equipment, gloves or other articles do not come into contact with the produce.
15. Workers should not work in the garden or handle food if they are unable to control discharge of fluids from nose, mouth, or eyes; they should also abstain from working in the garden or handling food if they have diarrhea or other signs of gastrointestinal illness.

In signing this form, I agree to adhere to the requirements listed above and agree to implement best agricultural practices for this culinary garden under the definition of a “Community Food Producer” defined in section 113752 of the California Retail Food Code.

Print: __________________________ Signature: __________________________ Date: ________________