MASON COUNTY
Public Health & Human Services

OFFICE USE ONLY

FEP# _____

FOOD ESTABLISHMENT PERMIT APPLICATION

SECTION I- TYPE OF ESTABLISHMENT & GENERAL INFORMATION

☐ **New Establishment** ☐ **Remodel or Addition** ☐ **Change of Ownership**

Change of Ownership requires a new application & plan review

Previous Name of Establishment: _____

Please Print Clearly

Date Submitted: _____ Projected Date of Opening: _____

Name of Establishment: _____

Establishment Phone: #_____ Email: _____

Establishment Address: _____
Street

_____
City State Zip

Parcel Number: _____

Mailing Address: _____
Street

_____
City State Zip

Days of the Week Open: _____ Hours of Operation: _____ to _____

Special Months/Hours of operation: _____

Owner Name: _____

Phone #: _____ Email: _____

Manager Name_____

Phone #: _____ Email: _____

Revised: 1/3/2023 **This form may be scanned and available for public view on the Mason County Web site.**

MASON COUNTY
Public Health & Human Services

Failure to complete the following sections will delay processing or the application may have to be returned.

SECTION II- WATER

- Water shall be received from an approved public water system under WAC 246-290 and be of sufficient capacity to meet peak water demands of the Food Establishment.
- Hot water generator and distribution system shall be sufficient to meet the peak hot water demands throughout the Food Establishment.

Public Water System Name: _____ WFI Number: _____

Note: This information can be obtained from your water company or system manager.

SECTION III- SEWAGE DISPOSAL

The Septic System is (check one):

____ **Municipal Sewer:** Go to section IV

____ **Holding Tank for Self-Contained Mobile Unit**: Please attach copies of:

- Holding tank capacity
- Plumbing schematic
- Schedule of estimated dumping frequency
- Location of approved dumping station to be used

____ **On-Site Septic System**: Please attach copies of:

- Tank pumping receipt (must be from within the last 6 months)
- Complete septic records (can be found at: https://property.co.mason.wa.us/TaxSifter/Search/Results.aspx)

SECTION IV- BUILDING

Is this new construction? ____YES _____NO

What was the previous use of the building? _____

Total Seating Capacity Including Lounge: _____ Number of Checkstands: _____

- Submit approval of occupancy and business licenses required from other governing agencies.
- Attach a floor plan showing all equipment, sinks, storage areas and drains. (See Example 3)
- Provide a detailed description of all appliances, sinks and hot water tanks. See Equipment list worksheet provided. Please provide the size of the hot water tank as well as input (BTU or kW).

SECTION V- MENU & FOOD PREPERATION PROCESS

- Submit a copy of a menu or list of menu items.
- Provide a food preparation flow chart and description of the food preparation process. (See Example 1 & 2)
- Please check the appropriate box below: What will your establishment be using mainly for serving?

_____Single service items (plastic utensils, paper plates, etc.) Or _____Reusable items

MASON COUNTY
Public Health & Human Services

PERMITTING PROCESS

Please allow at least 15 working days for processing the application. It may take longer if problems are found, or the application is not complete. Use the Food Establishment Checklist to efficiently check that all information required is provided. After the review process is complete you will be contacted by phone to set up a preoperational inspection and be notified of the Fee's that apply to your Food Establishment. There is a fee per hour for the plan review process and preoperational inspection. Your establishment can not open until all processes are complete and your permit has been issued.

Please mail or drop off the completed applications to:
Mason County Public Health 415 N 6th Street, Shelton WA 98584, or email to sevans@masoncountywa.gov

Food worker card classes are now offered online. Please visit https://www.foodworkercard.wa.gov/language.html to take the course and test. All employees are required to have a current food worker card on hand prior to working in a food establishment. All food worker cards must be kept current and renewed prior to expiration date. All Managers/Persons in Charge (PIC) must be trained in a Certified Food protection Manager course (CFPM). The CFPM/PIC must make sure the persons in charge are trained and able to control food safety in the establishment.

To receive and retain your food establishment permit, all local, state, and federal food and food establishment regulations must be followed. https://doh.wa.gov/sites/default/files/legacy/Documents/Pubs//332-033.pdf

If you have any questions, please contact our office at 360-427-9670 ext. 279

I have read and understood the entire document. I agree to all its requirements for obtaining a food establishment permit in Mason County. The undersigned attests to the accuracy of the information provided in this application. The applicant agrees to comply with Chapter 246-215 Food Service and allow the regulatory authority access to the establishment as per the code requirements.

I, the undersigned, have read instructions provided, and understand and agree to the application process and requirements of a food establishment:

Owner Signature: _____Date: _____

All year-round food establishments renew their permits in December/January for the next calendar year. You will receive an invoice reminder in the mail at the end of December. However, it is your responsibility to ensure that the fee is paid on time. If the permit fee is not received by the end of January fines may be applied. This does not apply to seasonal/summer operations. Permit must be paid prior to the opening date.

MASON COUNTY
Public Health & Human Services

Food Establishment Information

Instructions: Indicate the processes that take place in the food establishment. Review WAC Requirements for processes to be used.

Process	
Produce Washing WAC 246-215-03318	❑ N/A ❑ Yes
Thawing WAC 246-215-03510	❑ N/A ❑ Yes
Cooking WAC 246-215-03400	❑ N/A ❑ Yes
Hot Holding WAC 246-215-03525 Hot food maintained at 135°F or above	❑ N/A ❑ Yes
Cold Holding WAC 246-215-03525 Cold food maintained at 41°F or below	❑ N/A ❑ Yes
Cooling WAC 246-215-03515 Time/Temperature Control for Safety food will be cooled to 41°F within 6 hours; 135°F to 70°F within 2 hours	❑ N/A ❑ Yes If yes, method used _____ If yes, # of menu items cooled _____
Reheating WAC 246-215-03440 Food must be reheated to a temperature of 165°F for 15 seconds within 2 hours	❑ N/A ❑ Yes If yes, method used _____

Food Establishment Type: OFFICIAL USE ONLY

____ Restaurant ____ Complex-Large ____ Complex-Small ___ Non-Complex Large ____ Non-Complex Small

_____Grocery/Market ____ 0-3 Check Stands ___ 4+ Check stands
Additional Departments ____ Bakery ___ Meat ___ Seafood
____ Deli ___ Espresso

_____Kitchen ____ Large ___ Small

_____Tavern ____ Complex-Large ___ Complex-Small ___ Non-Complex

___School/Jail Food Service ____ Central Kitchen ___ Satellite Kitchen ___ Headstart/preschool

_____Catering ____ Off Premises Vending-Licensed Restaurant ___ Catering with Commessary Only

___ Confectionary ____ Espresso ____ Bed & Breakfast ____ Bakery

MASON COUNTY
Public Health & Human Services

Food Establishment Checklist

As you prepare your submittal, please remember your attention to detail will expedite the processing of your proposal and thus help to reduce the costs and time for plan review. Below is a detailed outline of the information our office will need to complete our review. Please initial next to each item as it is completed or determined "N/A".

Note: This information is a guideline to assist you in preparing your plans for review. You will be responsible for meeting all the requirements of the Washington Administrative Code 246-215, Article II – Rules, and Building, Plumbing, Mechanical, and Fire Codes.

INITIALS OF APPLICANT	ITEM	DESCRIPTION	OFFICE USE ONLY
	Fee	**Fee** There is a fee for the pre-operation inspection and Application review. This fee covers 1.0 hour of plan review. Additional time will require additional fees. Once the review is done you will be contacted with the Amount for your Food Establishment Permit.	
	Menu and Food Flow	**Menu** • Submit a menu or complete list of food and beverages to be offered (including seasonal, catering, and banquet menus). • Any future changes in the menu must be pre-approved by the health department. **Food Flow** • Include all foods that will be prepared and served, along with a description of all food preparation steps. Provide details of each step from receipt to service. **Use the enclosed food flow preparation chart as an example (example # 1 & 2).**	
	Floor Plan, Equipment Schedule, Finish Schedule, etc.	**Scaled Floor Plan** • Prepare a drawing showing the entire establishment and all existing and proposed new equipment and facilities. These plans do not have to be professionally drawn. **See attached example # 3** **Equipment Schedule** • Provide copies of specification sheets and/or equipment model numbers for all equipment. All equipment must be NSF (National Sanitation Foundation) approved or its equivalent**. See attached example # 3 and fill out attached Equipment List form.** **Finish Schedule** • Surfaces of **walls, floors, ceilings, counters, shelving, and equipment** throughout the establishment shall be **smooth, non-absorbent, durable, and easily cleanable**. Include a finish schedule (list of surface materials) with the plans. **See attached example # 5.** **NOTE:** • All floor-wall junctures and permanent equipment floor junctures shall be coved. Contact your local building department for requirements. • Wood and concrete surfaces shall be sealed. • Provide sneeze guards for food service lines, buffet, self-service, and salad bars.	
	Sinks	**Hand Washing** • Hand washing sinks shall be provided in **all** food preparation and service areas. More than one may be required. **See attached example # 8.** • Handwashing instructional signs are required at each handwashing sink. **See attached example #8.** **Ware Washing** • Dish/utensil washing sinks and dishwashers in all food preparation/service areas including liquor service areas must be large enough to wash, rinse, and sanitize all utensils, dishes, and cookware used in the establishment. A three-compartment sink is required, and in addition, a commercial dishwasher may be added for convenience. Dishwashing machines must be NSF-approved. A pre-rinse sink is required for dishwashers. **See attached example # 6.** • Drainboards, utensil racks, or tables large enough to accommodate all soiled and clean items that might accumulate during hours of operation must be provided for necessary utensil holding before cleaning and after sanitizing. **Other Sinks** • A utility/mop sink shall be provided inside the facility. • A food preparation sink may be required. You cannot use the three-compartment, mop, or handwashing sink for food preparation. More than one food preparation sink may be required. **See attached example # 7.**	

INITIALS OF APPLICANT	ITEM	DESCRIPTION	OFFICE USE ONLY
	Plumbing	**Plumbing Schedule** • Submit a plumbing schedule, listing kitchen fixtures and indicate which have direct or indirect drains (i.e., air gap). **See attached example # 4.** **Backflow Prevention** • Provide indirect drains for food preparation sinks, ice machines, condensate from refrigeration units, and any unit used to dispense food or beverages. **See attached example # 9.** • Provide vacuum breakers on all faucets with threaded hose bibs. • Specific plumbing questions should be directed to your local building department, including questions about grease trap requirements and capacity.	
	Restrooms	**Restrooms** • Provide employee restrooms, that meet local building department standards. Contact the local building department for standards. • Public restrooms must be available if your foods will be provided for on-site consumption. • Restrooms shall have handwashing sinks equipped with hot and cold water and shall be provided with **soap and single service towel dispensers or air hand drying devices.** • Restroom doors shall be self-closing.	
	Refuse and Pest Control	**Refuse, Recyclables, and Returnables** • Indicate a refuse storage location with an area for a container and equipment washing on your plans. You shall also fill out the attached **Waste Disposal Form.** • The refuse area must be provided with a concrete or machine laid slab. A screen or fencing around the refuse area is recommended. Wastewater generated at the garbage storage area must be drained into a sanitary sewer or an approved on-site sewage system. Wastewater must not enter the storm sewers. **Pest Control** • Provisions shall be provided for the exclusion of insects and rodents (screens, self-closing doors, down draft fans, weather stripping, etc.)	
	Misc.	**Storage** • All food, utensils, and single service item storage must be a minimum of 6" above the floor and no storage can be under sewer and water lines. A separate storage area must be provided for chemicals such as cleaners, lubricants, pest control materials, and other poisonous, toxic items. **Lighting** • Lighting must be adequate in all food preparation, service, storage, restroom, and equipment and utensil washing areas. All lights in food preparation, service, and storage areas, and dishwashing areas shall be shielded. **Hoods and Ventilation** • Indicate the proposed exhaust ventilation system on the plans. Contact your local building department for requirements. Exhaust hoods may be required. • Filters and grease extracting equipment shall be easily removable for cleaning.	
	Other Jurisdictions and Government Agencies	**The applicant/owner has contacted other government agencies to obtain approval to operate.** Permission to operate by other government agencies is often determined by site location, cooking methods, size of unit or other additional requirements needing approval. Such agencies may include, but not limited to, county and/or city officials for planning, zoning, building, fire, or permitting and liquor control board.	
	Water Source and Wastewater Forms	• Submit proof of adequate water service bill and sewer (utility bill showing service address). • If the establishment is served by a septic system, submit the as-built record drawing and the most recent Operation and Maintenance report from a Licensed provider. • Must be served by a class A or B public water system.	
	CFPM	Must Submit Active Manager Control Tool Kit Plans for the Following • Certified Food Protection Manager Certificate • Date Marking Plan/Toolkit • Employee Health Plan/Toolkit • Vomit and diarrhea Clean-up plan	

MASON COUNTY
Public Health & Human Services

Equipment List

Facility Name_____

List all food service equipment, including make and model numbers. Examples include, but are not limited to, refrigerators, sinks, stoves, ovens, steam tables, blenders, ice machines, and countertop appliances.

All equipment ID numbers must correspond to location on floor plan. Equipment must be commercial grade and meet ANSI standard (NSF, ETL, or UL Sanitation listed). List only one item per line.

EXAMPLE

ID #	Kind of Equipment	Make	Model #
1	Refrigerator 8x8 walk-in	ACME	R-789WI
2	Ice Machine	GAPP	IM-987
3	3-compartment dish wash sink w/drainboards	ACME	S-3CWD

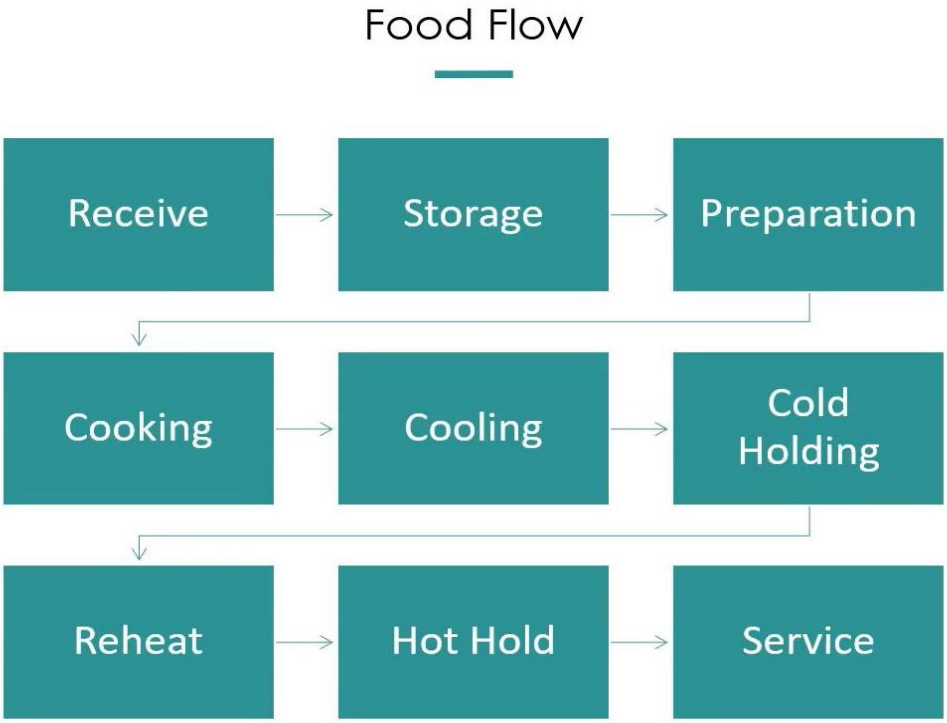
☐ *Check here if the equipment list is already included on floor plan.*

ID #	Kind of Equipment	Make	Model #

MASON COUNTY
Public Health & Human Services

Example # 1

Example: Food Flow Chart/Preparation Steps



Source/received state Us Chef Store/Raw Frozen Chicken	**Food Storage & Thawing** Chicken stored in Freezer then thawed in refrigerator/walk-in cooler, Held at 41°F or below	**Food Prep Step 1** Trim chicken and rinse in food preparation sink
Food Prep Step 2 Marinate in buckets located in the walk-in cooler, Held at 41°F or below	**Food Prep Step 3** Grill chicken to 165°F or above	**Food Hot-Holding &/or Serving Method/Process** Hot hold in steam table at 135°F or above
Left Over/Cooling Process Left over chicken cooled in 2-inch metal pan in walk-in cooler **7.**	**Cold-Holding** Cold hold left-over chicken in walk-in cooler at 41°F or below **8.**	**Re-Heating Process to Serving** Left over cold chicken re-heated to 165°F or above and hot held in steam table at 135°F or above **9.**

If all steps are not used put N/A or use area to add additional preparation information as needed. Be detailed and make sure to note the temperatures in which you are cold holding and hot holding and note final cooking and reheating temperatures.

Food Flow Chart/Preparation Steps

1 flow chart per menu Item. Make additional copies as needed.

Menu Item: _____

Receiving

Source:

What Condition:

1.

Food Storage & Thawing

2.

Food Preparation Step 1

3.

Food Preparation Step 2

4.

Cooking:

Final Cook Temperature:

5.

Hot-Holding &/or Serving Process

Preparing steps to serve:

Equipment Being used for Hot-Holding:

Utensils Used to prevent-Cross-Contamination:

Temperature Monitoring:

Time:

6.

Cooling:

What Cooling Process is Used:

Temperature Monitoring Process:

7.

Cold-Holding:

Location & Temperature:

Cold-Holding During Transport:

8.

Re-Heating Process to Serving &/or Hot holding.

Other Steps to Service: (Slicing)

9.

Re e v

Example # 2

Description of Food Preparation Process

Examples:

Teriyaki Chicken with Salad
- 30 pounds of raw chicken delivered frozen 3 times a week
- Chicken thawed in refrigerator on bottom shelf
- Once thawed, chicken is trimmed (process takes approximately 30 minutes) and rinsed in food preparation sink
- Marinated in bucket in refrigerator
- Cooked on grill to 165°F (temperature is taken using a digital thermometer)
- Hot held in steam tables at 135°F or higher
- Chicken order is grilled quickly prior to serving
- Leftover chicken is transferred to a shallow 2-inch depth metal pan, level or food not exceeding 2-inches, uncovered and immediately refrigerated until 41°F or below
- Per order, leftover chicken is taken from the refrigerator and reheated on the grill to 165°F and served until fresh product is needed

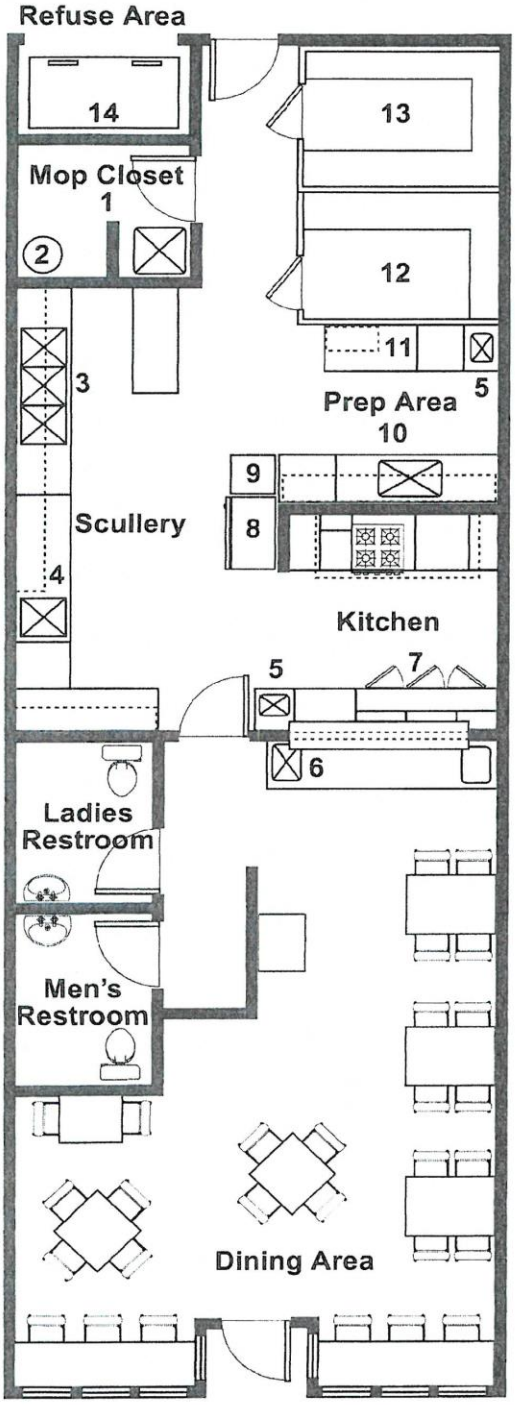
- 4 boxes of lettuce delivered 3 times a week
- The lettuce is stored in the refrigerator on top shelf
- Food preparation sink is cleaned and sanitized
- Lettuce is rinsed in food prep sink (gloves worn)
- Lettuce is then cut on sanitized cutting board (gloves worn)
- Stored in plastic bins in refrigerator on top shelf
- Per order, lettuce is dispensed with tongs to serving plate
- Served with packaged dressing

Cheeseburger
- 40 pounds of beef patties are delivered twice a week. Product is transferred and stored in walk-in cooler on the bottom shelf at 41°F or below
- Small quantities of hamburger patties are transferred to refrigerated drawer located under grill
- Per order, hamburger buns are toasted (gloves worn)
- Once the patty has reached a cooking temperature of 155°F (checked with digital thermometer), cheese is added and melted.
- Beef patty is then placed on the bun and condiments are added (ketchup, mustard, shredded lettuce, tomatoes, and onions)
- Product is wrapped and served

~All equipment must be commercially certified and ANSI/NSF Approved.

ANSI-American National Standards Institute ~ NSF-National Sanitization Foundation

Example # 3



EQUIPMENT SCHEDULE

1 Mop Sink
2 Hot Water Heater
3 3 Compartment Pot and Pan Wash Sink
4 Dishwasher with Pre-Rinse Sink
5 Hand Sink
6 Water Fill Station
7 Sandwich Preparation Refrigerator
8 Reach-in Refrigerator
9 Ice Machine
10 Food Preparation Sink
11 Work Counter with Slicer
12 Walk-in Refrigerator
13 Walk-in Freezer
14 Garbage Area

FINISH SCHEDULE

Floor

Kitchen	Vinyl Comp Tile with Base Coving
Restroom	Vinyl Comp Tile with Base Coving
Dining	Low Fill Carpet
Garbage	Sealed Concrete

Wall

Kitchen	Gypsum Board
Cook Line	Stainless Steel
Dishwash	Gypsum Green Board with FRP* BD**
Restroom	Gypsum Board with FRP* BD**
Dining	Gypsum Board with Enamel Paint

Ceiling

Kitchen	Gypsum Board with Enamel Paint
Dining	Suspended with Acoustical Tile
Restroom	Suspended with Acoustical Tile

* FRP - Fiber Reinforced Plastic
** BD - Board

This plan meant to illustrate health requirements only

Example # 4

Food Establishment Plan Review Schedule Examples

Example Equipment Schedule

The following tables are for example only. Equipment lists will vary depending on the needs of each individual food service facility. Manufacturer names and model numbers shown are fictitious and use for example only.

Item	Equipment	Manufacturer/Model #	Notes
1	Handwash sink	Clean Hands INC #HS1	
2	Food prep sink	Sinks for Veggies #VS1	With one drainboard
3	Dish Sink	Clean Products LTD #DS1	3-compartment, 2 drainboard
4	Mop Sink	Clean Products LTD #MS1	
5	Prep refrigerator	Keep It Cold Co. #PR1	
6	Walk-in	Keep It Cold Co. #WI1	Prefab stainless panels
7	Oven/Range	Hot Stuff Now #O-R2	Combination unit

Example Plumbing Schedule

The following table is for example purposes only. Plumbing schedules will vary depending on the needs of each individual food service facility.

Item	Fixture	Drain	Cold Water	Hot Water	Notes
1	Hand sink	Direct	Yes	Yes	
2	Prep sink	Indirect	Yes	No	To floor sink
3	Dish sink	Indirect	Yes	Yes	To floor sink
4	Dishwasher	Indirect	Yes	No	To floor sink
5	Mop sink	Direct	Yes	Yes	
6	Walk-in condensate line	Indirect			To floor sink
7	Steam table	Indirect	No	Yes	To bell drain

Examples of Plumbing Fixtures Requiring *In*direct Drains (**see attached example #9**)

- Food preparation sinks
- Ware-washing sinks and dishwashers
- Refrigerators and freezers including walk-in refrigerators
- Ice machines and ice storage bins
- Steam tables and kettles
- Dipper wells
- Espresso machines and fountain beverage machines
- Any other equipment which holds food and requires a drain

Note: For actual requirements please check with your local building department for the most current plumbing regulations.

Example # 5

Food Establishment Plan Review Schedule Examples

Finish Schedule

The following table provides examples of some of the acceptable finish materials for floors, walls, and ceilings by area. Note that this is not an all-inclusive list; after being reviewed finish materials not included in this table may also be acceptable. The primary requirements are that the surface is smooth, durable, and easily cleanable.

Area	Floor	Wall	Ceiling
Kitchen	Quarry tile, poured seamless sealed concrete, sheet vinyl	Stainless steel, tile with sealed grout, FRP board	Vinyl clad, non-perforated tiles, plastic laminate panels, drywall with gloss enamel finish
Food Prep and Ware-washing	Quarry tile, poured seamless sealed concrete, sheet vinyl	Stainless steel, tile with sealed grout, FRP board	Vinyl clad, non-perforated tiles, plastic laminate panels, drywall with gloss enamel finish
Dry Storage	Quarry tile, poured seamless sealed concrete, sheet vinyl	Stainless steel, tile with sealed grout, FRP board, drywall with gloss enamel finish	Vinyl clad, plastic laminate panels, drywall with gloss enamel finish
Wait and Serving Stations	Quarry tile, poured seamless sealed concrete, sheet vinyl	Stainless steel, tile with sealed grout, FRP board, drywall with gloss enamel finish	Vinyl clad, plastic laminate panels, drywall with gloss enamel finish
Toilet Room	Quarry tile, poured seamless sealed concrete, sheet vinyl	Stainless steel, tile with sealed grout, FRP board, drywall with gloss enamel finish	Vinyl clad, plastic laminate panels, drywall with gloss enamel finish
Janitor Closet	Quarry tile, poured seamless sealed concrete, sheet vinyl	Stainless steel, tile with sealed grout, FRP board	Vinyl clad, plastic laminate panels, drywall with gloss enamel finish
Walk-ins	Quarry tile, poured seamless sealed concrete, sheet vinyl	Aluminum, stainless steel, FRP board	Aluminum, stainless steel, FRP board

MASON COUNTY
Public Health & Human Services

Waste Disposal Plan

Facility Name_____

Garbage

Name of the Company _____

Size and Type of Container _____

Frequency of Pick-Up _____

Location of Container _____

Distance from Building _____

Waste Oil

Name of the Company _____

Size and Type of Container _____

Frequency of Pick-Up _____

Location of Container _____

Distance from Building _____

Recycling

Name of the Company _____

Size and Type of Container _____

Frequency of Pick-Up _____

Location of Container _____

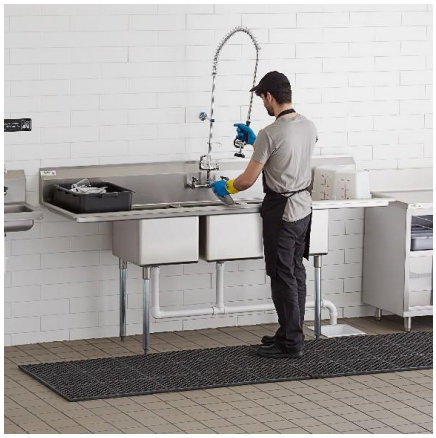
Distance from Building _____

Example # 6

Examples of Food Establishment Sinks

Dishwasher with pre-rinse sink, including spray arm and with clean dish-drying table

Three-compartment Sink



Food Preparation Sinks

Example # 7

Examples of Food Establishment Sinks

Mop Sinks

Grease Trap/Grease Interceptors

Examples of Food Establishment Sinks

Handwash Sinks

Keep Them Clean

Employees must wash their hands:

Copyright © International Association for Food Protection

- Before working with food
- After going to the restroom
- After handling raw meat
- After handling dirty dishes, chemicals or garbage
- After taking breaks, eating, or smoking
- After getting hands dirty

Example # 9

Examples of Food Establishment Sinks and Plumbing Fixtures

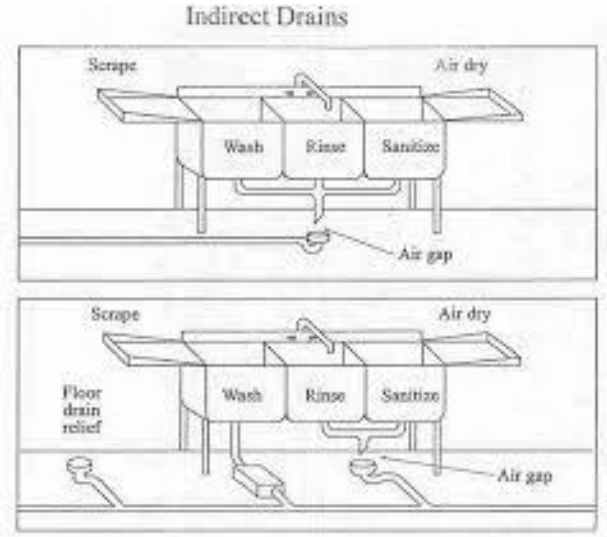
Floor Sinks (with and without grates)

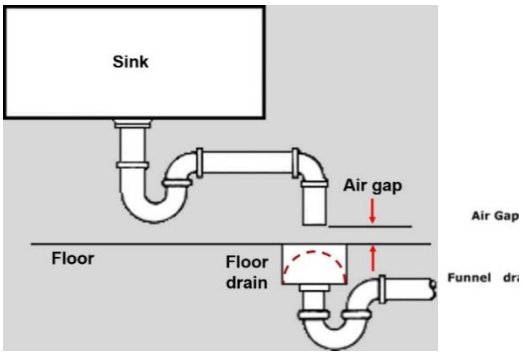
Backflow Prevention Devices

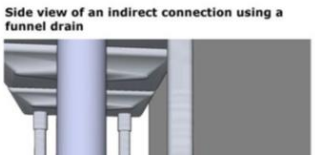
Hose-bib Vacuum Breaker

Reduced Pressure Backflow (RPZ) device used for post-mix soda.

Indirect Drain







Source: Contra Costa Health Services, CA

MASON COUNTY
Public Health & Human Services

Change of Ownership Instructions

A food establishment transfer (Change-of Ownership) is required to transfer a food establishment from one permit holder to a new owner.

Due Diligence: Prospective owners and/or leases who are interested in acquiring new ownership with an existing food establishment are encouraged to contact our department at (360)427-9670 ext. 279 in advance to arrange a time to review our health department records of the food establishment (i.e. health inspections) **prior** to the ownership change.

New Owner/Operator Consultation:

Fill out the first page of this Food Establishment Application and Submit to Mason County Public Health. Mason County Public Health will set up a consultation with new owner(s) to discuss the Change of ownership process and expectations to meet retail food code requirements. Appointments are conducted at mason County Public Health or by phone consultation. To schedule, please call (360) 427-9670 ext. 279.

If the facility has been closed for **more than 30 days**, the *New Food Establishment Application* should be filled out to its *entirety instead*. In such cases, these food establishments must remain closed until final approval of the NEW food establishment has been granted.

A Change of Ownership applicant may remain in continual operation while taking over a previously approved food establishment, but only under the following circumstances and conditions:

- The current food establishment has no record of unresolved significant facility and/or maintenance issues that require an excessive amount of work needing repairs and/or replacement.
- **Current and valid food worker cards for the person-in-charge during all hours of operation.**
- The food establishment has NOT been closed for longer than 30 days prior to the date reflected on the lease, execution date of the sales document and/or County assessor's records.
- The facility has no immediate plans to modify the existing menu that would ultimately change the type, number, and layout of equipment; thus, affecting the layout of the food establishment since it was last reviewed and approved by our department.
- After taking ownership, the new owner(s) has not started and will not begin any major renovation and/or remodeling.
- The applicant is prepared to undergo a facility and maintenance assessment of the food establishment in approximately 30-days from the date first submitting the Change of Ownership application.
- The applicant is prepared to bring all items up to code that had not previously been followed through on.
- At the conclusion of the assessment, there shall be no critical violations left unresolved. Failure or evidence of critical violations observed during the assessment may result in immediate closure until the Change of Ownership process has been completed, all applicable fees are paid, and a permit issued. Follow-up assessments shall be scheduled in a timely manner to verify corrections are made.
- Pre-Operational inspections are $90/hour.
- All fees for inspections and permit fee will be paid immediately following the review and approval.

New owner(s) or lessees found operating a previously approved food establishment, without any Change of Ownership application received, shall be notified in writing, and allowed two weeks to submit their application. Failure to submit the application within two weeks is cause for immediate closure and shall remain closed until the Change of Ownership process has been completed with an issued permit.

Food Establishment Facility Assessment:
An assessment of your food establishment is required as part of the Change of Ownership application process. After we have reviewed and accepted the above required information, we shall contact the owner(s) listed on the Change of Ownership application to schedule the assessment in approx. 30 days. To expedite this process and to assure a successful assessment, we recommend owners conduct their own assessment to assure it is indeed ready.

Be advised, a recently passed routine health inspection does not always guarantee that the existing food establishment's facility construction/maintenance, finish schedule, facility conditions, lighting, plumbing, HVAC and food service equipment currently meet retail food code requirements and standards. At the time of Change of Ownership all retail food code requirements and standards are expected to be meet.

Below is a partial list of facility maintenance and equipment deficiencies often overlooked prior to an assessment or commonly not in compliance; thus, needing to be addressed prior to COO final approval:

- Inadequate hot water supply: At the 3-compartment sink, fill two of the three compartments with hot water at minimum 120°F. All hand sinks, including restrooms, shall have at minimum 100°F.
- Inadequate refrigeration and freezer storage space and without working and interior thermometers.
- Commercial refrigeration not operating at the correct cold holding temperature of 41°F or less.
- Three-compartment sink is not available or not sized correctly based on size of wares (pots, pans, etc.).
- Food preparation sink not available yet required based on the menu and food flow.
- Inadequate lighting directly over the food preparation area. (50-foot candles minimum) Safely secured.
- Equipment not working correctly as specified by the manufacturer and in unsanitary conditions.
- The soda carbonation backflow device not tested and/or tagged within the last 12 months.
- Drain lines required for specific plumbed equipment fail to have at least a 1-inch air gap.
- Exterior door seals and/or openings in ceiling or walls allowing easy entrance of vermin.
- Refrigerated door seals are torn or missing.
- Food equipment missing the appropriate food safety certification marks (i.e. NSF, UL, ETL)
- Floor, walls, and ceiling (including food and nonfood contact surfaces) in unsanitary conditions or in disrepair.
- Missing splash shield(s) in areas prone to potential cross contamination adjacent to specific sinks.

MASON COUNTY
Public Health & Human Services

Frequently Asked Questions

What is a plan review?

A plan review is the process by which we ensure that your plans and equipment meet the state and local health requirements before you begin construction of your project. By communicating with you early in your endeavor, we hope to prevent costly mistakes, while ensuring that your food service establishment is built in compliance with the minimum standards and in the best interest of the public's health. The process of opening, remodeling, or repairing a food service establishment may also require the approval of other departments such as the Department of Labor and Industries, the Liquor Control Board, and local building, planning, and fire departments. A plan review is required under the following circumstances:

- When a food establishment is newly constructed.
- When an existing structure is converted for use as a food establishment.
- When an existing food establishment undergoes an extensive remodel or repair.
- When you purchase or take over an existing establishment and make changes that will require remodel or repair; or
- When an establishment changes from one type of operation to another.

Can my home kitchen be licensed as a Retail Food Establishment?

No, home kitchens cannot qualify for a Food Service Operation Permit from the Mason County Public Health Environmental Health Division.

What will happen if I revise my plans after the original plans have been approved?

Plan resubmittal is required if changes are made after MCPH has approved the original plans. An additional plan review fee will be assessed for this service. Failing to resubmit plans when changes have been made, after original plan approval, will delay final approval for the facility. If MC

Can I open for business immediately after construction is completed?

A preoperational inspection is required before the food establishment may open. Call at least seven days in advance to notify Mason County Public Health of final approvals from other city, county and state agencies as required. We will then schedule this inspection to help avoid delays in opening.

What will the inspector look for during the preoperational inspection?

The inspector will be ensuring the following items have been satisfactorily completed:

- The facility was constructed as indicated on the last set of approved plans.
- The facility has obtained final approval for all other applicable agencies, such as the Department of Labor and Industries, the Liquor Control Board and the local building, planning, and fire departments.
- The utilities such as water, gas, electric and wastewater disposal are provided; and
- All equipment is in working order.

I have completed everything listed so far in this outline. Now can I open for business?

All plan review and permit fees must be paid before you will be allowed to open Once you have passed your final pre-operational inspection from MCPH, paid for, and received your food permit, and received approval for occupancy from other permitting entities such as the fire department, building department, etc., then you are ready to begin serving your first customers.

What if I am purchasing or taking over a current establishment?

Please contact Mason County Public Health to set up a Change of Ownership Review appointment, to receive the proper forms, new application, or change-of-ownership form (COO), in order to obtain a Food Service Operating Permit for the new business. See Change of Owner ship Instructions.

How often will my food establishment be inspected?

The Mason County Health Department will conduct minimum of 2 Routine food inspection in a 12-month period. Other inspections may be needed in the case of illness investigations, ongoing complaints, or if requested by establishment manager/person in charge.

What if I want to add new items to my menu?

You will need to submit the new items along with the food preparation steps and description of food preparation process for each new food. Mason County Public Health will review the new additions and the process to evaluate if your current permit applies to the new menu items. You will then be contacted with approval and direction if fee's apply to upgrade current permit.