



# Food Establishment Operational Assessment

Southwest Utah Public Health Department

## Purpose and introduction

This document assists health department staff in reviewing food establishment plans and ensures a clear, consistent review process for applicants.

Food establishment plan review ensures:

- Food establishments are constructed or renovated according to current rules and regulations
- Food safety and sanitation are improved through efficient layout and workflow design
- Potential code violations are identified before construction

## Required documents for plan approval

The following must be submitted for review:

- Completed application
- Full menu
- Floor plan of the unit, including water tank size, wastewater tank size, make and model of refrigeration units, and the location of doors and service windows
- Items listed in the food service checklist

## Instructions

All sections of this form must be completed, and incomplete applications may delay review and approval; if a question does not apply, write "N/A".

## Definition

**PHF/TCS** means potentially hazardous food, also known as time/temperature control for safety foods, which require specific time or temperature control to remain safe.

---

**Notice for Public Personal Data Collection:** [swuhealth.gov/public](https://www.swuhealth.gov/public)

**Accessibility Notice / Aviso de Accesibilidad:** If you need assistance or an alternative format to complete this form, please email: [info@swuhealth.gov](mailto:info@swuhealth.gov). Si necesita asistencia o un formato alternativo para completar este formulario, por favor envíe un correo electrónico a: [info@swuhealth.gov](mailto:info@swuhealth.gov).

## Food supply and storage

### Frozen foods

1. How often will frozen foods be delivered?

2. Where will frozen foods be stored?

### Refrigerated foods

3. How often will refrigerated foods be delivered?

4. Where will refrigerated foods be stored?

### Dry foods

5. How often will dry goods be delivered?

6. Where will dry goods be stored?

7. What types of containers will be used for bulk foods (rice, flour, sugar, etc.)?

8. Identify finished materials of countertops, cabinets, and shelves:

## Food preparation procedures

### Produce

9. Describe produce handling procedures from receiving to service (including storage, washing, preparation location, and timing):

### Poultry

10. Describe poultry (chicken, turkey, eggs) handling procedures:

### Meat

11. Describe meat (beef, pork, lamb) handling procedures:

### Seafood

12. Describe seafood handling procedures:

### Ready-to-eat foods

13. Describe ready-to-eat food handling procedures (portioning, storage, service):

## Thawing PHF/TCS foods

### Produce

14. How will PHF/TCS foods be thawed under refrigeration?

15. How will PHF/TCS foods be thawed using running water?

16. How will PHF/TCS foods be thawed using a microwave (as part of the cooking process)?

17. Will any foods be cooked directly from frozen? If yes, describe:

18. Other thawing methods (if applicable):

### Cooking and service

19. List all foods that will be cooked and served:

20. List all foods that will be held hot before service (for example, steam table or warmer):

21. List all foods that will be cooked and cooled:

22. List all foods that will be cooked, cooled, and reheated:

23. List all foods that will be heated and served:

## Cooling

How PHF/TCS foods are cooled to 41°F within 6 hours (135°F→70°F in 2 hrs; 70°F→41°F in 4 hrs)

### Cooling methods

Method	Thick meats (more than 1")	Thin meats (1" or less)	Beans, rice, pasta	Soups, sauces	Mixed foods (casseroles, etc.)
Shallow pans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ice bath	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reduce volume	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rapid chill unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stirring w/frozen utensil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Other cooling method

## Reheating

24. How will PHF/TCS foods be reheated to 165°F within 2 hours?

25. Where will reheating take place?

26. What equipment will be used for reheating?

## Hot and cold holding

27. How will PHF/TCS foods be maintained at 135°F or above during hot holding?

28. What equipment will be used for hot holding (type, number, location)?

29. How will PHF/TCS foods be maintained at 41°F or below during cold holding?

30. What equipment will be used for cold holding (type, number, location)?

## Pest control

31. Will all outside doors be self-closing and rodent/insect-proof?

Yes       No       N/A

32. Will screens be provided on all entrances, openings, and vents?

Yes       No       N/A

33. Will all openable windows have #16 mesh screens?

Yes       No       N/A

34. Will electrical insect control devices be used?

Yes       No       N/A

35. Will air curtains be used?

Yes       No       N/A

If yes, describe:

36. How will pipes and electrical conduit be sealed?

37. How will surrounding areas be kept free of pests (brush, litter, etc.)?

38. Pest control operator:

39. Treatment frequency:

## Refuse, recyclables, and returnables

40. How will refuse be stored in the unit?

41. Where will refuse be stored during operation?

42. How often will refuse be removed from the unit?

43. How will grease waste be handled (if applicable)?

44. Will recyclable materials be separated?

Yes

No

N/A

45. How will recyclables be stored and removed?

## Water supply & disposal

46. Where will you obtain your water supply?

47. What is the capacity of the water heater?

48. What is the BTU/kW rating of the water heater?

49. What is the size (gallons) of the freshwater tank?

50. What is the size (gallons) of the wastewater tank?

## Dishwashing facilities

51. Manual dishwashing: identify the length, width, and depth of each compartment of the 3-compartment sink:

52. Will the largest pot and pan fit into each compartment?

Yes       No       N/A

If no, describe procedure:

53. Describe air-drying space (type, size, location):

54. What type of sanitizer will be used?

Chlorine       Quaternary Ammonia       Other

If other, specify:

55. Where will poisonous or toxic materials be stored?

56. Will cleaning and sanitizing chemicals be stored at the workstation?

- Yes       No

If yes, how will they be separated from food and food-contact surfaces?

57. Will linens be laundered at the commissary?

- Yes       No

If not, where will they be laundered?

58. Identify clean and dirty linen storage locations:

59. How often will linens be delivered and picked up?

60. How will adequate electrical power be provided to ensure uninterrupted operation?

61. What materials will be used for floors, walls, ceiling, and coved base?

62. How will lighting fixtures be protected from breakage?

## Utilities/building systems

63. How will adequate electrical power be provided for all equipment?

64. Will all plumbing systems meet applicable code requirements?

Yes       No

65. How will ventilation be provided in the unit?

66. How will lighting fixtures be protected from breakage?

67. What materials will be used for floors, walls, ceiling, and covered base?

68. How will grease and wastewater be properly disposed of?

69. Will backflow prevention devices be installed where required?

Yes       No

70. Are all electrical installations compliant with applicable code requirements?

Yes       No

71. How will electrical outlets and wiring be protected from damage and moisture?

72. Will the unit maintain required hot and cold holding temperatures under full load?

Yes       No

## Certification and Statement of Accuracy

I certify that the information provided in this operational assessment is true and accurate to the best of my knowledge. I understand that any changes to the operation that affect food safety or the approved plan must be submitted to the health department for review prior to implementation.

---

### Applicant Information

Applicant Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

---

### Signature

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

---

### Approval Notice

Approval of these plans and specifications by the Southwest Utah Public Health Department 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). A pre-opening inspection of the establishment, with equipment in place and operational, will be necessary to determine whether it complies with the regulations governing food service establishments.