



# COUNTY OF LAKE

## HEALTH SERVICES DEPARTMENT

Division of Environmental Health

922 Bevins Court, Lakeport, CA 95453-9739

Lakeport Office (707) 263-1164/FAX 263-1681

# RETAIL FOOD FACILITY PLAN CHECK APPLICATION

**New Construction**     **Remodel**

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

Owner/Operator: \_\_\_\_\_

Business Address: \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone/Cell: \_\_\_\_\_

Plan Check Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone/Cell: \_\_\_\_\_

Fax # \_\_\_\_\_ email: \_\_\_\_\_

Size of Entire Building (in square feet): \_\_\_\_\_ Seating Capacity: \_\_\_\_\_

Former Business Name (if applicable): \_\_\_\_\_

Water Supply:     Private     Public    Name of Water System: \_\_\_\_\_

Sewage Disposal:     Septic System     Community Sewer: (Name) \_\_\_\_\_

**Type of Facility:**    (Mark all that apply)

Restaurant     Restaurant/Bar     Bar     Retail Market     Prepackaged Foods

Mobile Food Facility     Caterer     Bakery     Deli     B & B     Other \_\_\_\_\_

**Documents Being Submitted Include: (3 sets of the following)**

Site Plan     Scaled Floor Plan     Grease Interceptor/Trap Specification Sheet     Menu

Equipment List & Specifications     Room Finish Schedule     Ventilation Hood Worksheet

Hourly Hot Water Demand Table     Other \_\_\_\_\_

I acknowledge that final construction must be approved by Lake County Environmental Health, and a **valid Health Permit must be applied for, paid for, and issued prior to opening** for business or use of remodeled areas.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**For Office Use Only**

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

Category: \_\_\_\_\_

Fee Amount: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Facility No: \_\_\_\_\_

New Business – Opening: \_\_\_\_/\_\_\_\_/\_\_\_\_

Existing Establishment: \_\_\_\_\_

Change of Ownership: \_\_\_\_/\_\_\_\_/\_\_\_\_

Former Name: \_\_\_\_\_

Inspection Freq. \_\_\_\_\_ Due \_\_\_\_/\_\_\_\_/\_\_\_\_

Circle:

Retail/Restaurant

Seasonal/Annual

LR: 1332    1333

HR: 1364    1365

Fees: Low Risk-New: \$585; Low Risk-Remodel: \$286; High Risk-New: \$661; High Risk-Remodel: \$520