



**Department of Public Health
Food Division**

Health Plan Review Form

The Village of Oak Park
Village Hall
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Oak Park, Illinois 60302-4272

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Nearly every new or significantly altered facility serving or selling food or beverages in Oak Park must submit plans to the Oak Park Permit Processing Division — call 708.358.5430 for information on submitting plans. Completed *Health Plan Review Form*.

- ✓ Equipment manufacturer's specification sheets, numbered to match equipment numbers on plans.
- ✓ Detailed menu.
- ✓ Detailed finish schedule for all custom millwork cabinets/counters.

A *Plan Review Food Service Design and Construction Manual* are available to assist with the initial design of drawings.

Every business is unique. However, in general, to pass a Health Plan Review, the following will be required:

- ✓ Hand washing sink that is for employee hand washing only
- ✓ Commercial-grade equipment -residential equipment is not permitted
- ✓ Dry storage space for canned goods, paper products and retail items
- ✓ Employee lockers or an area used only for employee belongings
- ✓ Utility sink with hooks or other means to allow mops to air dry
- ✓ Adequate lighting in food preparation areas, storage areas and coolers
- ✓ Smooth and cleanable surfaces for floors, walls and ceilings in food storage and preparation areas

Based on menu and equipment, many facilities may also need the following:

- ✓ Dishwashing sink with three compartments and two drain boards
- ✓ Food/vegetable sink for processing produce and other foods
- ✓ Ventilation hoods for grill line, cooking equipment and high temperature
- ✓ Fire suppression system for grease producing equipment such as fryers and grills
- ✓ Grease interceptor (grease trap) connected to dishwashing sinks, floor drains and other sinks to remove fats, oils and grease
- ✓ Walk-in coolers/freezers for cooling and holding cold foods

PROPOSED ESTABLISHMENT NAME				Phone Number
Street Address	City	State	Zip Code	
OWNER NAME				Phone Number
Street Address	City	State	Zip Code	Fax
PROJECT CONTACT				Phone Number
Street Address	City	State	Zip Code	Fax
ARCHITECT CONTACT				Phone Number
Street Address	City	State	Zip Code	Fax
CONTRACTOR				Phone Number
Street Address	City	State	Zip Code	Fax

REFRIGERATION

Have you provided cooler space to separate raw meats and poultry from ready-to-eat foods?	D Yes	D No	D N/A
Are all walk-in coolers/freezers accessible from the inside of the establishment	D Yes	D No	D N/A
Will you be cooling large volumes of food?	D Yes	D No	D N/A
Have you provided enough space and equipment for quick chilling prepared food?	D Yes	D No	D N/A
Are any of the refrigerators next to heat-producing equipment?	D Yes	D No	D N/A
Will you be handling large amounts of cold, potentially hazardous foods or cutting large Amounts of raw meat?	D Yes	D No	D N/A
Is the ice machine large enough to meet all operational needs, i.e. drink ice, rapid cooling, etc.?	D Yes	D No	D N/A
Are you having a buffet line?	D Yes	D No	D N/A
If yes, is it mechanically refrigerated?	D Yes	D No	D N/A
Indicate all the methods you plan to use to cool foods:	D Ice Bath	D Refrigeration	D Shallow Pans

STORAGE FACILITIES

Is all shelving National Sanitation Foundation approved?	D Yes	D No	D N/A
Is shelving located in dishwashing areas stainless steel or vinyl/epoxy coated?	D Yes	D No	D N/A
Calculate your total dry storage area. Total dry storage should be at minimum 25% of your kitchen square footage.			
Use the following to calculate your dry storage area:			
Total Kitchen Area = _____square feet (wall to wall dimensions)			
Total Kitchen Area X 25% (.25) = Total Dry Storage Area Needed			
Have you located the storage areas for food, utensils and beverages?	D Yes	D No	D N/A
Have you supplied a separate storage area for the storage of toxics?	D Yes	D No	D N/A
Have you installed a heavy-duty mop rack able to hold wet mops above the mop basin?	D Yes	D No	D N/A
Are you using firewood as a fuel source for cooking equipment?	D Yes	D No	D N/A

✓ If yes, specify the location of firewood storage on plans.

Reminder: Firewood must be stored separate from food storage and food service operations. Additional measures must be taken to prevent rodent and insect infestations.

EMPLOYEE AREA

Indicate the total number of employees: _____			
Have you provided for each employee:	D Coat Hooks	D Lockers	D Other _____
Have you provided:	D Dressing Room	D Break Area	D Other _____
✓ Specify the location of personal employee storage on the plans. Break areas, dressing rooms and personal belongings storage areas cannot be in areas used for food storage, preparation or service or for the washing or storage of utensils			

RESTROOMS

Have you provided the correct number of accessible washroom facilities for the public?	D Yes	D No	D N/A
✓ Refer to Section 890.810 b) 2) B of the Illinois State Plumbing Code			
✓ The public must be able to access the washroom(s) without traveling through the kitchen.			
Are the restrooms mechanically vented to the outside?	D Yes	D No	D N/A
Have you provided garbage containers with sanitary lids for sanitary items and soiled diapers?	D Yes	D No	D N/A

HANDWASHING SINKS

✓ Paddle faucet handles are recommended

How many hand washing sinks excluding bathroom lavatories are you providing? _____

Are all hand washing sinks supplied with dispensed soap and dispensed disposable paper towels?	D Yes	D No	D N/A
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SANITIZING EQUIPMENT AND FACILITIES**Hot Water System**Specify the water heater storage capacity in gallons: _____

MANUAL UTENSIL WASHING

- Have you specified a standard food service three-compartment sink with two integral drain boards? D Yes D No D N/A
- Are the three-compartment sink bowls large enough to accommodate your largest piece of equipment? D Yes D No D N/A
- Do you have a clean-in-place procedure for stationary equipment? D Yes D No D N/A
- Have you provided additional space for the storage of clean utensils, glassware, etc.? D Yes D No D N/A
-

MECHANICAL UTENSIL WASHING

- Are you installing a dishwashing machine? D Yes D No D N/A
- Have you included a soiled dish table? D Yes D No D N/A
- Have you included a clean dish table? D Yes D No D N/A
- Did you provide mechanical ventilation at the dish machine? D Yes D No D N/A
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CHEMICAL SANITIZING MACHINE

- Are you providing a chemical sanitizing machine? D Yes D No D N/A
- Are your chemical supply containers stored off the floor? D Yes D No D N/A
- Did you provide an audible and visual warning indicator installed on the sanitizing dispenser? D Yes D No D N/A
- Have you provided a location for air drying utensils after being washed? D Yes D No D N/A

If yes, where? _____

HOT WATER SANITIZING MACHINE

- Are you installing a hot water sanitizing machine? D Yes D No D N/A
- Dishwashing machine demand of rinse water _____ GPH @ 20 PSI flow pressure.
- Water heater recovery rate _____ GPH _____ °F Rinse Water
- Manufacturer _____ Model # _____
- Booster heater recovery rate _____ GPH
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LIGHTING

- Are your food preparation and utensil washing areas lit according to specifications? D Yes D No D N/A
- Have you supplied fluorescent lights with vapor-proof fixtures and cold-tolerant ballasts
In your walk-in refrigerator/freezer units? D Yes D No D N/A
- Are your restrooms lit according to specifications? D Yes D No D N/A
- Have you provided dimmer switches for lighting in bar areas? D Yes D No D N/A
- Are all of your light fixtures over food preparation, display, service, storage and utensil washing
Areas shielded with explosion tubes and end caps, shatterproof lenses or shatterproof bulbs? D Yes D No D N/A
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LAUNDRY

- Do you have a washer? D Yes D No D N/A
- ✓ If yes, a dryer is also required.
- Do you have a dryer? D Yes D No D N/A
- Does a door separate your laundry from the food service operation? D Yes D No D N/A
- Is shelving provided to keep clean linens stored separately from soiled items? D Yes D No D N/A
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INSECT & RODENT CONTROL

- Are all of the voids and gaps around utility lines pipes, etc. sealed? D Yes D No D N/A
- Have you provided self-closing mechanisms for all your exterior doors? D Yes D No D N/A
- Are all your openable windows properly screened? D Yes D No D N/A
- Is your garbage area within 20 feet of the facility's door(s) or window(s)? D Yes D No D N/A
- Will you have any doors that create an open-air atmosphere? D Yes D No D N/A

✓ If yes, you must specify air curtains or screens on your plans.

Do you have: D Drive-through D Carry-out D Walk-up window(s)

Type(s) of protection provided for your drive through/carry-out or walk-up windows:

D Spring loaded bump pad D Electric eye opener D Air curtain

D Fly fan D Self-closing screen/window

GARBAGE AND REFUSE DISPOSAL

Type of waste pickup provided:

D Dumpster(s) D Compactor D Grease Container(s) D Recycling Container(s)

Type of surface for storage of disposal containers: D Concrete Pad D Machine-laid asphalt

✓ Provide a detailed drawing and/or picture of the exterior garbage area. The location of the exterior equipment such as dumpsters for refuse collection and recycling containers shall be screened from public view on three sides by a solid wall or fence at least six feet in height and on the fourth side by a solid gate at least five feet in height. The enclosure shall be constructed in such a manner and of such materials so as to be rodent proof.

PLUMBING

Will a grease interceptor (trap) be provided? D Yes D No D N/A

If yes, what size grease interceptor will be provided (must be sized according to section 890.510a of the Illinois State Plumbing Code)?

How will your grease interceptor be installed? D Outdoor D Indoor recessed D Other _____

Type of janitorial sink? D Floor Basin D Laundry D Wall-mounted slop sink

Will you install a garbage grinder? D Yes D No D N/A

Potable Water Backflow protection is required on the following pieces of equipment.

✓ Check the pieces of equipment that apply to your facility

D Chemical mixing system D Toilet(s) D Urinal(s) D Dishwashing machine(s)

D Garbage grinder(s) D Carbonator(s) D Pre-rinse sprayer(s) D Water faucets with hose attachments

Indirect Open site Waste Connections are required on the following pieces of equipment.

✓ Check the pieces of equipment that apply to your facility

D Deli cooler clean out drain(s) D Walk-in refrigerator drain(s) D Refrigerator/freezer condensation line(s)

D Steam table(s) D Ice maker/ice bin(s) D Dishwashing machine(s)

D Salad bar(s) D Dipper well(s) D Three-compartment sink: food service & bar service

D Food preparation sink(s) D Soda dispenser(s) D Steam kettle(s)

ROOM FINISH SCHEDULE

- ✓ Specific brand names and colors for materials should be specified whenever possible to ensure acceptability.
- ✓ All room finishes must be smooth, easily cleanable and lightly colored.
- ✓ Specify stainless steel on walls at grill line and behind all grease producing equipment.
- ✓ Specify a non-absorbent finish such as fiberglass reinforced paneling wallboard or lightly colored tile behind the three-compartment sink(s) and mop sink(s).

ROOM OR AREA	FLOOR	FLOOR BASE OR COVE	WALLS	CEILING
Cook line				
Kitchen Preparation				
Utensil Washing				
Food Storage				
Bar				
Mop/Cleaning Area				
Basement Storage				
Wait Area				
Walk-in Refrigerator(s)				
Other:				
Other:				
Other:				
Other:				

