

FOOD SERVICE REVIEW WORKBOOK

FOOD PREPARATION REVIEW		
Check ALL categories of time/temperature control for safety food (TCS)		
CATEGORY	YES	NO
Thin meats, poultry, fish eggs (hamburgers, chicken breasts, sandwich meats, fish filet, etc.)		
Thick meats, whole poultry (whole roasts, pork, turkey, chicken, meatloaf, etc.)		
Hot processed foods (soups, stews, chowders, meatballs, casseroles, etc.)		
Bakery goods (pies, custards, creams, etc.)		
Other (describe):		
FOOD SUPPLIES		
	All food must be inspected and approved sources.	
	Identify the food supplier(s) and the frequency of deliveries:	
COLD STORAGE		
	Adequate and approved freezer and refrigeration space must be available to store frozen foods in a frozen state and refrigerated foods at 41° and below.	
	Provide the method used to calculate cold storage requirements:	
	Provide total square footage of space dedicated to walk-in cold storage: _____ Provide total square footage of space dedicated to reach-in cold storage: _____	

FOOD SERVICE REVIEW WORKBOOK

	Will raw meats, poultry and seafood be stored in the same refrigerators and freezer with cooked/ready-to-eat foods?	YES	NO
	If YES , how will cross-contamination be prevented?		
	Each refrigerator must have a thermometer.		
	Number of refrigeration units: _____ Number of freezer units: _____		

THAWING

Please indicate by checking the appropriate box(es) how potentially hazardous foods (PHF) in each category will be thawed. More than one method may apply.

THAWING PROCESS	THICK MEATS	THIN MEATS	FISH SEAFOOD	POULTRY PRODUCTS	COLD FOODS	BAKED GOODS
In a Refrigerator						
Submerged in Running Water less 70° F						
Cooked from a Frozen State						
Microwaved as part of the cooking process						

Other (describe):

COOKING PROCESS:

	Food temperature measuring devices shall be provided and be readily accessible for use in assuring attainment and maintenance of safe food temperatures. Temperature measuring devices must be accurate to $\pm 2^{\circ}\text{F}$
--	--

FOOD SERVICE REVIEW WORKBOOK

	Identify which type and how many food product thermometers (0°F-212°F) will be available and be used to measure final cooking/reheating temperatures of TCS:
--	--

Minimum cooking time and temperature of product utilizing convection and conduction heating equipment:

INTERNAL COOKING TEMPERATURE SPECIFICATIONS FOR RAW ANIMAL FOODS

Internal Cooking Temperature	Raw Animal Foods
145°F for 15 seconds	<ul style="list-style-type: none"> 🔔 Raw eggs cooked for immediate service 🔔 Fish, except as listed below 🔔 Intact Meat 🔔 Commercially raised game animals, rabbit
155°F for 17 seconds	<ul style="list-style-type: none"> 🔔 Ratites (Ostrich, Rhea and Emu) 🔔 Injected meats 🔔 Mechanically tenderized meats 🔔 Raw eggs not for immediate service 🔔 Comminuted meat, fish, or commercially raised game animals
165°F for <1 second (instantaneous)	<ul style="list-style-type: none"> 🔔 Wild game animals 🔔 Poultry 🔔 Stuffed fish, meat, pork, pasta, ratites & poultry 🔔 Stuffing containing fish, meat, ratites & poultry

***Whole Meat Roasts:** Refer to cooking charts in the Food Code ¶ 3-401.11(B)

List each piece of cooking equipment:

HOT HOLDING

How and where will hot TCS foods be maintained at 135°F or above during holding for service? Indicate type and number of hot holding units.

COOLING

Please indicate by checking the appropriate box(es) how TCS foods will be cooled from 135°F to 70°F in 2 hours and from 70°F to 41°F in an additional 4 hours.

FOOD SERVICE REVIEW WORKBOOK

COOLING PROCESS	THICK MEATS	THIN MEATS	FISH SEAFOOD	POULTRY PRODUCTS	HOT FOODS	BAKED GOODS
Shallow Pans in the Refrigerators						
Ice Baths						
Stirring with Iced Chill Sticks						
Mechanical Rapid Chill Equipment						
Other (describe):						
FOOD PREPARATION						
	Please list all food items prepared more than 12 hours in advance of service.					
	How will cooking equipment, cutting boards, counter tops and other food contact surfaces which cannot be submerged in sinks or put through a dishwasher be cleaned and sanitized? Please describe the procedure:					
	How will ingredients for cold ready-to-eat foods such as tuna, mayonnaise and eggs for salads and sandwiches be pre-chilled before mixing or assembly?					

FOOD SERVICE REVIEW WORKBOOK

The following questions deal with the food preparation procedures for your facility. Food preparation procedures are needed to obtain information about how the food will be prepared and to help determine if adequate facilities are available for the safe preparation of food. Food preparation procedures should consider the types of foods prepared, times of day when the food is prepared, and which equipment, surfaces, and utensils are used for food preparation in the facility.

PRODUCE

	Will produce be washed or rinsed prior to use?	YES	NO
	Is there a designated location that will be used for washing or rinsing produce?	YES	NO
	Will this area be used for other operations (i.e. utensil washing)?	YES	NO
	Please indicate the location of the produce WASHING area(s) and describe the procedures that will be used to wash the produce. Include the time of day this area will be used and the frequency for washing or rinsing the produce at this location:		
	Please describe the produce PREPARATION procedures (cutting, chopping, slicing, etc.) and indicate the location of the equipment to support these operations. The preparation procedures should include the menu items in which the produce will be used and the time of day and frequency of preparation for the produce at this location:		

SEAFOOD

	Is there a designated location that will be used for washing, rinsing, or thawing raw seafood?	YES	NO
	Will this area be used for other operations (i.e. utensil or produce washing)?	YES	NO
	Please describe the raw and cooked seafood PREPARATION procedures (washing, rinsing, cutting, chopping, slicing, etc.) and indicate the location of equipment to support these operations. The preparation procedures should include the menu items in which the seafood will be used and the time of day and frequency of preparation for the seafood at this location:		

FOOD SERVICE REVIEW WORKBOOK

POULTRY			
	Is there an approved location used for washing, rinsing, or thawing poultry?	YES	NO
	Will this area be used for other operations (i.e. utensil or produce washing)?	YES	NO
	Please describe the raw and cooked poultry PREPARATION procedures (washing/rinsing, cutting, chopping, slicing, etc.) and indicate the location of equipment to support these operations. The preparation procedures should include the menu items in which the poultry will be used and the time of day and frequency of preparation for the poultry at this location:		

PORK & RED MEATS			
	Is there a designated location that will be used for washing, rinsing, or thawing raw pork and raw red meat?	YES	NO
	Will this area be used for other operations (i.e. utensil or produce washing)?	YES	NO
	Please describe the raw and cooked pork and red meats PREPARATION procedures (washing/rinsing, cutting chopping, slicing, etc.) and indicate the location of equipment to support these operations. The preparation procedures should include the menu items in which the pork and red meats will be used and the time of day and frequency of preparation for the pork and red meats at this location:		

FOOD SERVICE REVIEW WORKBOOK

DRY GOODS STORAGE/STORAGE OF SINGLE SERVICE ITEMS (paper cups, plates, straws, etc.)

	Is appropriate dry good storage space provided for based upon menu, meals offered, frequency of deliveries, and items being stored?	YES	NO
	Provide information on the frequency of deliveries and the expected gross volume that will be delivered for each item.		
	Provide total square footage of space dedicated to dry storage _____ sq. ft.		
	Where will single-service items be stored in the service location(s)?		
	Will approved food storage containers be used to store bulk food products? Describe	YES	NO

PERSONNEL

	Will disposable gloves and/or utensils and/or food grade paper be used to minimize direct hand contact of ready-to-eat foods?	YES	NO
	<p>Your food establishment must have a policy to exclude or restrict food workers who are ill with symptoms compatible with foodborne illness (vomiting, diarrhea, nausea, stomach cramps, high fever, jaundice) or have infected cuts and lesions.</p> <p>Describe your policy to restrict food workers with these symptoms:</p>		

FOOD SERVICE REVIEW WORKBOOK

	<p>Class II, III and IV food establishments are required to have a Certified Food Manager (CFM) employed in a full-time, supervisory position at the establishment: List the name(s) of the CFM:</p>
	<p>Identify the Alternate CFM:</p>
	<p>Describe the training that the CFM will provide to the food workers and how written records of training will be maintained:</p>

FINISH SCHEDULE

AREA	FLOOR	BASE (FLOOR/WALL JUNCTURE)	WALLS	CEILING
Kitchen/Cooking Area				
Bar				
Food Storage				
Other Storage				

FOOD SERVICE REVIEW WORKBOOK

AREA	FLOOR	BASE (FLOOR/WALL JUNCTURE)	WALLS	CEILING
Toilet Rooms				
Dressing Rooms				
Garbage & Refuse Storage				
Mop Service Area				
Basement				
Other:				
Other:				
Other:				
Other				

Identify the finishes of the counter, cabinets, storage shelves, tables, etc.:

PLUMBING

Utility service lines and pipes shall not be unnecessarily exposed along walls and floors.
Horizontal utility service lines and pipes shall not be installed on the floor.

Applicants must identify the type of plumbing connections that will be used on the drains for the fixtures listed below.

Plumbing Fixture	INDIRECT WASTE			FIXTURES WITH DIRECT WASTE CONNECTIONS
	Floor Sink	Floor Drain	Other	
Dishwasher				
Ice machine				
Ice storage bins				
Food prep sinks				

FOOD SERVICE REVIEW WORKBOOK

Utensil/pot wash sinks				
Steam tables				
Dipper wells				
Refrigeration				
Potato peeler				
Other:				
Other:				
Other:				

If floor drains are not shown on plans, please indicate locations:

Applicants must identify the type of backflow prevention to be used for the water supply in each plumbing fixture listed below:

Plumbing Fixture	Backflow Prevention Device	Air Gap
Hose Connection		
Soda Carbonation System		
Chemical Dilution System		
Water Supply for Garbage Grinders		
Water Fill for Soda Guns		
Dipper Wells		
Other:		
Other:		

FOOD SERVICE REVIEW WORKBOOK

DISHWASHING FACILITIES

A three-compartment sink shall be provided and used whenever washing, rinsing and sanitization of equipment and utensils are conducted.

What size sink will be used for warewashing?	Number of sinks	Size of sink compartments			Drainboard Sizes	
		Length	Width	Depth	Right	Left
Three compartment sink						
Four compartment sink						
	Does the largest pot, pan, utensil or container fit into each compartment of the three-compartment sink?				YES	NO
	What type of sanitizer will be used?					
	Chlorine	Quaternary Ammonium		Iodine		
	Hot water	Other:		Other:		
	Identify the Manufacturer, Make and Model of the Mechanical Dishwasher if one will be used:				N/A	
	Type of sanitation used:					
	Chemical type:		Test Kits:			
	Hot Water (180°F-194°F):		Identify the capacity of the booster heater:			
	Will ventilation be provided over the dishwasher?				YES	NO
	All dish machines must have templates with operating instructions. All dish machines must have accurate temperature and pressure gauges.					
	Will thermometers, test papers and/or test kits be available for checking sanitizer concentrations at the three-compartment sink and dishwasher?				YES	NO
	Is appropriate air drying space available for the air drying of all washed utensils with the use of drain boards, was or overhead shelves, stationary or portable racks?				YES	NO

FOOD SERVICE REVIEW WORKBOOK

	Please describe the type and location of the air drying space for the cleaned items:							
	Provide the total square footage of shelf space dedicated to air drying _____ sq. ft.							
WATER SUPPLY								
	Please identify which type of water supply will be provided.	Well Water			Public Water			
		YES		NO		YES		NO
	If the water supply is from a well water source, is it registered and approved as a transient, non-community water supply?				YES	NO	PENDING	
	If YES – Please attach a copy of written approval and/or permit.							
	Will ice be made on premises or purchased commercially? Please specify:							
	Describe provision for ice scoop storage:							
WATER HEATER								
	Water heater location: Water heater storage capacity: _____ Gallons Storage							
	Water heater recovery rate in gallons per hour at 100°F temperature rise: _____ Gallons per hour							
INSECT AND RODENT CONTROL								
APPLICANT: Please check appropriate boxes.						YES	NO	N/A
	Will all outside doors be self-closing and have rodent –proof flashing/weather stripping?							
	How will fly protection be provided on all outside entrances?							
	Screen Doors							
	Air Curtain							
	Other:							

FOOD SERVICE REVIEW WORKBOOK

	Identify the type of fly protection that will be provided on all openable windows.	YES	NO	N/A
	Minimum #16 mesh screening?			
	Air Curtains			
	Self-Closing Devices			
	Will all pipe penetrations, beverage chases & electrical conduit chases be sealed; ventilation systems exhaust and intakes protected?			
GARBAGE AND REFUSE				
Inside				
		YES	NO	N/A
	Will all garbage containers have lids?			
	Will refuse be stored inside? If so, where?			
Outside				
		YES	NO	N/A
	Will the area around premises be maintained clear of unnecessary brush, litter, boxes and other vermin harborage?			
	Will a dumpster be used?			
	Number:	Size:	Frequency of pickup:	
	Where will the dumpster be located?			
	Identify the Waste Hauler that will be used:			
	Will the dumpster be cleaned on site?	YES	NO	
	If the dumpster is cleaned on site, the wastewater from the cleaning operation must discharge to the sanitary sewer system.			
	Will the dumpster be cleaned by an off-site contracted cleaning service?	YES	NO	
	If YES , please provide name and address of the firm contracted for this service:			
		YES	NO	N/A
	Will a compactor be used?			

FOOD SERVICE REVIEW WORKBOOK

	Number _____ Size _____ Frequency of pickup _____ Contractor:		
	Where will the compactor be located:		
	Will the compactor be cleaned on site?	YES	NO
	If the compactor is cleaned on site, the wastewater from the cleaning operation must discharge to the sanitary sewer system.		
	Will the compactor be cleaned by an off-site contracted cleaning service?	YES	NO
	If YES , please provide the name and address of the firm contracted for this service:		
	Describe the surface and location where the dumpster/compactor/barrels will be stored:		
	Will trash barrels be stored outside?	YES	NO
	If YES , please describe their locations:		
	Specify the type and location of cooking grease waste storage receptacles:		
	Will there be an area to store recycled containers? Describe:	YES	NO
	Identify the location(s) and size(s) of the grease trap(s):		

FOOD SERVICE REVIEW WORKBOOK

MOP CLEANING FACILITIES				
	Will a separate mop basin be provided?	YES		NO
	If YES , please describe the facility for cleaning mops and other maintenance equipment:			
HANDWASHING/TOILET FACILITIES				
	Will there be handwashing sinks in the food preparation, food dispensing, and warewashing areas?	YES		NO
	Will all handwashing sinks have mixing valves or combination faucets to provide water at a temperature of at least 100°?			
	Will self-closing metering faucets provide a flow of water for at least 15 seconds without the need to reactive the faucet?			
	Will soap dispensers be available at all handwashing sinks?			
	Will hand drying facilities (paper towels, air blower, etc.) and waste receptacles be available at all handwashing sinks and in each restroom?			
	Will toilet rooms have openable, screened windows or mechanical exhaust systems for ventilation?			
	Will all toilet rooms be self-closing?			
SEWAGE DISPOSAL				
	Will the building be connected to a municipal sewer?	YES		NO
	If NO , is the private disposal system approved? If YES – please attach a copy of the written approval and/or permit.	YES	NO	PENDING
DRESSING ROOMS				
	Will separate dressing rooms be provided?	YES	NO	N/A

FOOD SERVICE REVIEW WORKBOOK

	Describe the storage facilities for employees’ personal belongings (i.e., purses, coats, boots, umbrellas, etc.):		
CHEMICAL STORAGE			
	Will all cleaning materials and toxic items be stored away from food preparation and storage areas?	YES	NO
	Will insecticides/rodenticides (if used) be stored separately from cleaning and sanitizing agents?		
	Please describe the location of all toxic item storage – including areas in the food preparation areas where “in-use” chemicals will be stored:		
	Will all containers of toxic/cleaning material, including sanitizing spray bottles, be clearly labeled?	YES	NO
OTHER			
	Will a laundry washer and dryer be available on the premises?	YES	NO
	If YES , what items will be laundered?		
	If YES , please identify their locations and time of day they will be used:		
	Identify the location of dirty linen storage:		
	Will there be a basement space available for this food establishment?	YES	NO

FOOD SERVICE REVIEW WORKBOOK

	If YES , what activities (food preparation, storage, etc.) will take place in the basement?
--	--



STATEMENT: I hereby certify that the above information is correct. I fully understand that any deviation from the above without prior approval from the Manchester Health Department is prohibited.

Signature(s) _____

Owner(s) or Responsible Representative(s)

Date: _____

