



# Plan Review Requirements

Community Development Department  
Environmental Health Division  
5200 85<sup>th</sup> Avenue North / Brooklyn Park, MN 55443  
Phone: (763) 493-8070

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Welcome to Brooklyn Park. Thank you for your interest in opening or remodeling your food establishment in our city. The enclosed packet includes information you will need to get started. A meeting with our division is recommended before you submit final plans.

## 1. Plans and Equipment Specifications Submittal

A complete set of plans, to-scale, must be submitted to the Environmental Health Division for review. Plan submittals should include:

- Site
- Building
- Floor (equipment layout)
- Elevation drawings
- Finish schedules
- Plumbing
- Mechanical (including kitchen ventilation and makeup air)
- Electrical
- Fire protection

## 2. Equipment Specifications

Specification sheets of all equipment (including water heaters) must be provided. Shop drawings must be submitted for all custom equipment. All custom equipment must be approved by a food equipment testing agencies to NSF, ETL, UL standards.

## 3. Menu and Flow Diagram

A menu and food flow diagram must be provided. Equipment must support all types of food activities (storage, preparation, cooking, cooling, serving, etc.)

## 4. Application and Fee Submittal

The application included in this packet must be completely filled out and submitted with the appropriate fee for the health portion of the plan review. The plan review cannot be completed until all required items are submitted. The specific requirements are listed on the following page.

## 5. Food Service Construction Guide

The construction guide includes general requirements for a commercial food establishment and will answer many of your construction and design questions.

## 6. Food Establishment License

The license application and fee is not due until two weeks before opening your establishment. Please contact the licensing division at (763) 493-8182 if you have licensing questions or to request additional licenses for selling beer, wine, and/or liquor.

### **7. Other Permits- Building, Mechanical, Plumbing, Electrical, and Fire**

A building permit is required to build or demolish any wall or structure. Installation of HVAC, electrical or plumbing fixtures also requires a permit. Please contact a representative from building inspections at (763) 488-6379 to determine which "construction trades permits" are required.

### **8. Food Manager Certification when required**

Proof of manager certification and state license, or registration in an approved course is required.

***Note: Before beginning the plan review process, please check with the Planning Division at (763) 493-8057 to make sure the property is properly zoned for the type of establishment you are proposing.***

Please allow at least ten (10) working days to complete the plan review process. Failure to provide any of the required submittals at the onset of the plan review submittal may delay the plan review process. If changes are proposed after plans have been approved by this Division, additional plans indicating changes must be submitted in writing and approval must be received from the health authority.

Please contact the Environmental Health at (763) 493-8070 if you have questions or to schedule a pre-plan meeting. We look forward to working with you.



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**ESTBALISHMENT INFORMATION**

Name of Establishment \_\_\_\_\_ Phone Number \_\_\_\_\_  
Name of Business \_\_\_\_\_ Address \_\_\_\_\_  
Type of Establishment: Sit Down \_\_\_\_\_ Take-Out \_\_\_\_\_ Catering \_\_\_\_\_ Delivery \_\_\_\_\_ Grocery \_\_\_\_\_  
Wholesale \_\_\_\_\_ Liquor Service \_\_\_\_\_ Mobile Food Vehicle \_\_\_\_\_  
Owner's Name \_\_\_\_\_ Owner's Phone Number \_\_\_\_\_  
Owner's Address \_\_\_\_\_  
Owner's email \_\_\_\_\_

**PLAN INFORMATION**

Blue Prints Submitted By: Owner \_\_\_\_\_ Contractor \_\_\_\_\_ Architect \_\_\_\_\_ Supplier \_\_\_\_\_  
Application's name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_ Email \_\_\_\_\_

**ARCHITECT INFORMATION**

Firm Name \_\_\_\_\_ Architect's Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone number \_\_\_\_\_ Email \_\_\_\_\_

**FEES**

New Establishment – 150% of License Fee      Remodel (Same establishment & same owner) – 100% of License Fee

**PROJECT INFORMATION**

Type of Work: New Construction \_\_\_\_\_ Remodel \_\_\_\_\_  
Valuation of Work (Related to food services, not including land) \$ \_\_\_\_\_  
Estimated Start Date \_\_\_\_\_ Estimated Completion Date \_\_\_\_\_

**OPERATIONS INFORMATION**

Hours of Operation: Sun \_\_\_\_\_ Mon \_\_\_\_\_ Tues \_\_\_\_\_ Weds \_\_\_\_\_ Thurs \_\_\_\_\_ Fri \_\_\_\_\_ Sat \_\_\_\_\_  
Seating Capacity \_\_\_\_\_ Number of Staff \_\_\_\_\_ Total square feet of facility \_\_\_\_\_  
Number of food deliveries per week: Frozen \_\_\_\_\_ Refrigerated \_\_\_\_\_ Dry \_\_\_\_\_ Liquor \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**OFFICE USE ONLY**

Date Received \_\_\_\_\_ Date Approved \_\_\_\_\_ Plan Reviewer Sign \_\_\_\_\_

## Plan Submittal & Licensing

Individuals interested in opening and operating a food establishment must submit a plan review application with fees and obtain approval before operating (unless the applicant is taking over an existing food establishment). The plan review submittal requirements, application, and additional resources are available on our website at: [www.brooklynpark.org](http://www.brooklynpark.org). Once plans are approved and construction is completed, contact our office to request an inspection and a license application. The license fee is separate from the plan review fee.

The following information is required.

- License Period: January 1<sup>st</sup> to December 31<sup>st</sup>
- Completed application / License Fee
- Late Fees on license renewals: 1-15 days late=50% of license fee and 16+ days late=100% of the license fee
- License fees are not transferred or refunded
- Worker's Compensation Form
- Minnesota Tax Identification Number Form

Establishment Type	Fee
<b>Food Type I</b> - Full service/sit down restaurants, full menu cafeterias, buffet restaurants, catering kitchens, and similar.	\$695
<b>Food Type II</b> - Fast food, take out, pizza delivery, delis, drive-ins, ice cream shops, donut shops, limited or catered cafeterias, bakeries and similar.	\$580
<b>Food Type III</b> - Coffee Carts and Coffee-Only Shops, Bars, Concession Stands, Snack Stands, Continental Breakfasts, and similar.	\$415
<b>Food Grocery</b> - Prepackaged foods or the sale of foods to be consumed off site.	
• Large Grocery	\$995
• Small Grocery - Smaller grocery stores, Convenience Stores, Markets, and similar.	\$345
• Limited Pre-packaged - Video Stores, Gift Shops, Candy racks, and similar.	\$90
• Vending Machines (Nuts only= \$10)	\$25
<b>Food Institution</b> - Daycares, and Preschools, Churches	
• Full Operation - Full Kitchen.	\$445
• Limited Operation - Catered or Snacks Only.	\$235
• Pre-Packaged	\$120
*no charge for places of worship and non-profit organizations*	
<b>Food Institution</b> – Schools	
• Full Operation - Full Kitchen.	\$495
• Limited Operation - Catered or Snacks Only.	\$250
<b>Additional Food Facility</b> – A separate area of food or beverage preparation. May include bars, receiving areas, catering activities, or additional food establishments.	
• Per additional Type I or II facility, Large Grocery facility.	\$200
• Per additional Type III or Small Grocery facility.	\$100
* The higher rate facility is considered the main facility and each other type is an additional facility.	
<b>Seasonal Food</b> - Establishment continuously open for 6 business months or less in a calendar year.	½
• Minimum \$75	license fee



# Food License Application

Community Development Department

Environmental Health Division

5200 85<sup>th</sup> Avenue North / Brooklyn Park, MN 55443

Phone: (763) 493-8070

**GOVERNMENT DATA PRACTICES ACT - TENNESON WARNING:**

The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license without it. The data will constitute a public record if and when the license is granted.

*The undersigned hereby makes application to the City of Brooklyn Park, Hennepin County, Minnesota, for license subject to the laws of the State of Minnesota and of the City of Brooklyn Park.*

**Food License Type:**

- Food Type 1    Food Type 2    Food Type 3    Season Food    Food Institution    Limited Institution
- Pre-Packaged Institution    Large Grocery    Small Grocery    Pre-Packaged Grocery    Vending

Additional Facility (e.g. Bar, Coffee Shop, Catering, etc)  Yes    No (Type): \_\_\_\_\_

**Business /Owner Name:** \_\_\_\_\_

**Owner Email:** \_\_\_\_\_

**Doing Business As:** \_\_\_\_\_

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

Street

City

Zip Code

**Business Phone #:** \_\_\_\_\_

**Onsite Email (for food recalls, emergencies):** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact Phone #:** \_\_\_\_\_

**Onsite Manager Name:** \_\_\_\_\_ **Manager Phone #:** \_\_\_\_\_

**Business Owner Name:** \_\_\_\_\_ **Owner Phone #:** \_\_\_\_\_

**Owner's Address:** \_\_\_\_\_

Street

City

Zip Code

Is this a partnership?  Yes    No   Is this a corporation?  Yes    No

**If yes, attach a list of the names, addresses, and percent of interest of each.**

If this is not a corporation or partnership, is this a:  church    a school    an individual    other (please specify): \_\_\_\_\_

Are all special assessments and real estate taxes paid in full for the property where the business is located?  Yes    No

*Applicant agrees to comply with all laws, ordinances or regulations applicable whether they are federal, state, county or municipal. The undersigned declares that the information provided in this license application is truthful and authorizes the City of Brooklyn Park to investigate the information provided.*

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Office Use Only:**

Approved by \_\_\_\_\_ Fee \$ \_\_\_\_\_ License # \_\_\_\_\_

## MINNESOTA BUSINESS TAX IDENTIFICATION/ SOCIAL SECURITY NUMBER

Pursuant to 2011 Minnesota Statute, Chapter 270C DEPARTMENT OF REVENUE, (section 270C.72 TAX CLEARANCE; ISSUANCE OF LICENSES), the licensing authority is required to provide to the Minnesota Commissioner of Revenue your Minnesota business tax identification number and the social security number of each license applicant.

Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of this information:

- This information may be used to deny the issuance or renewal of your license in the event you owe Minnesota sales, employer's withholding or motor vehicle excise taxes;
- Upon receiving the information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement, the Department of Revenue may supply this information to the Internal Revenue Service;
- **FAILURE TO SUPPLY THIS INFORMATION MAY JEOPARDIZE OR DELAY THE PROCESSING OF YOUR LICENSE ISSUANCE OR RENEWAL APPLICATION.**

Please supply the following information and return along with your application to the licensing authority.

Applicant's Full Name	
Applicant's Address	
City, State & Zip	
Applicant's Social Security Number	
Position (Officer, Partner, Etc.)	
Business Name	
Business Address	
City, State & Zip	
Minnesota Tax Identification Number	
Signature	Date

**CERTIFICATION OF COMPLIANCE  
MINNESOTA WORKERS' COMPENSATION LAW COVERAGE**

**(FORM MUST ACCOMPANY LICENSE OR PERMIT APPLICATION)**

Minnesota Statute Section 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business or engage in an activity in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of MSS Chapter 176. The information required is: the name of the insurance company, the policy number, and dates of coverage or the permit to self-insure. This information will be collected by the licensing agency and retained in their files.

This information is required by law and licenses and permits to operate a business may not be issued or renewed if it is not provided and/or is falsely reported. Furthermore, if this information is not provided and/or falsely stated, it may result in a \$2,000 penalty assessed against the applicant by the Commissioner of the Department of Labor and Industry.

Full Name (Last, First, Middle)	
Doing Business As: (Business name if different than your name)	
Business Address	
City, State, Zip	Phone (    )

I am not required to have workers' compensation liability coverage because: <input type="checkbox"/> I have no employees. <input type="checkbox"/> I am self-insured (include permit to self-insure). <input type="checkbox"/> I have no employees who are covered by the workers' compensation law (these include: spouse, parents, children and certain farm employees).	
I certify that the information provided above is accurate and complete.	
Signature	Date

**OR**

Insurance Company Name ( <b>NOT</b> the insurance agent)	
Policy Number	
Dates of Coverage	
I certify that the information provided above is accurate and complete and that a valid workers' compensation policy will be kept in effect at all times as required by law.	
Signature	Date



# Lodging License Application

Community Development Department

Environmental Health Division

5200 85<sup>th</sup> Avenue North / Brooklyn Park, MN 55443

Phone: (763) 493-8070

**GOVERNMENT DATA PRACTICES ACT – TENNESON WARNING:**

The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license without it. The data will constitute a public record if and when the license is granted.

**The following information is required. All applications are subject to a 10-day approval period.**

- **License Fee: \$170.00 + \$5.00 per unit / maximum \$1,300.00**
- Total number of sleeping units to be licensed \_\_\_\_\_
- License period January 1<sup>st</sup> – December 31<sup>st</sup>
- Renewal Late fees (1 – 15 days late = 50% of license fee / 16 + days late = 100% of license fee)
- For group homes and similar – total number of occupants per dwelling unit? \_\_\_\_\_
- Will food be served at this location? \_\_\_\_\_ Yes \_\_\_\_\_ No
- Is worker’s compensation coverage required? \_\_\_\_\_ Yes \_\_\_\_\_ No
- Minnesota Tax Identification Number
- License fees are not transferable or refundable

*The undersigned hereby makes application to the City of Brooklyn Park, Hennepin County, Minnesota, for license subject to the laws of the State of Minnesota and of the City of Brooklyn Park.*

**Owner Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Owner Phone #:** \_\_\_\_\_

**Applicant Address:** \_\_\_\_\_  
Street City State Zip Code

**Business Name:** \_\_\_\_\_ **Doing Business As:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_  
Street City State Zip Code

**Is this a corporation?**  YES  NO     **Is this a partnership?**  YES  NO

**Is this an LLC?**  YES  NO *\*If yes, attach a list of names, addresses, and percent of interest of each.*

**Manager Name:** \_\_\_\_\_ **Manager Phone#:** \_\_\_\_\_

**Manager Email:** \_\_\_\_\_ **Emergency Phone #:** \_\_\_\_\_

*Applicant agrees to comply with all laws, ordinances or regulations applicable whether they are federal, state, county or municipal. The undersigned declares that the information provided in this license application is truthful and authorizes the City of Brooklyn Park to investigate the information provided.*

**Applicant’s Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Office Use Only:*

Approved by \_\_\_\_\_ Fee \$ \_\_\_\_\_ License # \_\_\_\_\_

**MINNESOTA BUSINESS TAX IDENTIFICATION/  
SOCIAL SECURITY NUMBER**

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Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of this information:

- This information may be used to deny the issuance or renewal of your license in the event you owe Minnesota sales, employer's withholding or motor vehicle excise taxes;
- Upon receiving the information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement, the Department of Revenue may supply this information to the Internal Revenue Service;
- **FAILURE TO SUPPLY THIS INFORMATION MAY JEOPARDIZE OR DELAY THE PROCESSING OF YOUR LICENSE ISSUANCE OR RENEWAL APPLICATION.**

Please supply the following information and return along with your application to the licensing authority.

Applicant's Full Name	
Applicant's Address	
City, State & Zip	
Applicant's Social Security Number	
Position (Officer, Partner, Etc.)	
Business Name	
Business Address	
City, State & Zip	
Minnesota Tax Identification Number	
Signature	Date

**CERTIFICATION OF COMPLIANCE  
MINNESOTA WORKERS' COMPENSATION LAW COVERAGE**

**(FORM MUST ACCOMPANY LICENSE OR PERMIT APPLICATION)**

Minnesota Statute Section 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business or engage in an activity in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of MSS Chapter 176. The information required is: the name of the insurance company, the policy number, and dates of coverage or the permit to self-insure. This information will be collected by the licensing agency and retained in their files.

This information is required by law and licenses and permits to operate a business may not be issued or renewed if it is not provided and/or is falsely reported. Furthermore, if this information is not provided and/or falsely stated, it may result in a \$2,000 penalty assessed against the applicant by the Commissioner of the Department of Labor and Industry.

Full Name (Last, First, Middle)	
Doing Business As: (Business name if different than your name)	
Business Address	
City, State, Zip	Phone (    )

<p>I am not required to have workers' compensation liability coverage because:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> I have no employees.</li> <li><input type="checkbox"/> I am self-insured (include permit to self-insure).</li> <li><input type="checkbox"/> I have no employees who are covered by the workers' compensation law (these include: spouse, parents, children and certain farm employees).</li> </ul>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

I certify that the information provided above is accurate and complete.	
Signature	Date

**OR**

Insurance Company Name <b>(NOT the insurance agent)</b>
Policy Number
Dates of Coverage

I certify that the information provided above is accurate and complete and that a valid workers' compensation policy will be kept in effect at all times as required by law.	
Signature	Date



# Building Permit Application

## Community Development Department

### Building Inspections Division

5200 85<sup>th</sup> Avenue North / Brooklyn Park, MN 55443  
 Phone: (763) 488-6379 / Fax: (763) 493-8171  
 6/17 www.brooklynpark.org

**GOVERNMENT DATA PRACTICES ACT - TENNESON WARNING:**

The data you supply on this form will be used to process the permit you are applying for. You are not legally required to provide this data, but we will not be able to process the permit without it. The data will constitute a public record if and when the permit is granted.

Site Address: \_\_\_\_\_ Date: \_\_\_\_\_

Business or Tenant Name: \_\_\_\_\_

**Contractor/Applicant Name:** \_\_\_\_\_ **License #** \_\_\_\_\_

Applicant is: Owner \_\_\_\_\_ Contractor \_\_\_\_\_ Other \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Permit Type: Residential \_\_\_\_\_ Commercial \_\_\_\_\_ New \_\_\_\_\_ Add / Alt \_\_\_\_\_ TI \_\_\_\_\_

**Work Description:** \_\_\_\_\_

Construction Code: IBC \_\_\_\_\_ IRC \_\_\_\_\_ **Valuation of Work \$:** \_\_\_\_\_

I hereby apply for a building permit and I acknowledge that the information above is complete and accurate; that the work will be done in accordance with the ordinances of the City of Brooklyn Park and with the Minnesota State Building Code; that I understand this is not a permit but an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plans, specifications and codes.

Payment method:  Cash  Check  Credit Card

**Applicant Email Address Required:** \_\_\_\_\_

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

Check box if pre-1978 residential structure and provide EPA certificate for lead paint activities. (2010 MN statute 326B.106 subd. 13 & 14) Licensed residential building contractor, residential remodeler, or roofer must provide a copy of their EPA certificate when working on pre-1978 residential structures.

**Office Use:**

Valuation \$ _____	Site _____	Construction Type _____ Occupancy _____
Permit Fee \$ _____	Footing/Fdtn. _____	Sprinklers _____ Sq Ft _____
Plan Review \$ _____	Poured Wall _____	<b>Approvals:</b> C.O. Yes <input type="checkbox"/> No
Surcharge \$ _____	Framing _____	Building _____
_____ SAC \$ _____	Insulation _____	Planning _____
_____ WAC \$ _____	Wallboard _____	Health _____
Connection \$ _____	Stucco/Lath _____	Engineering _____
License \$ _____	Photos _____	O&M _____
Investigation \$ _____	Other _____	Fire _____
<b>Total \$</b> _____	Final _____	Bonds _____

ADDN-R	BPPC-C	BPRPR-R	DECK-R	POOL-R
BPNPC-C	BPPC-C NEW	BSMT	GARA-R	RRW
BPNPC-R	BPPC-R NEW			

Permit Approved By: \_\_\_\_\_ Date: \_\_\_\_\_ Permit #: \_\_\_\_\_

(<http://www.health.state.mn.us/index.html>)



# Minnesota Certified Food Protection Manager (CFPM)

The Minnesota certified food protection manager (CFPM) is a leader for the food establishment's food safety team. The CFPM is recognized by the Minnesota Department of Health (MDH) and Minnesota Department of Agriculture (MDA) as meeting specific training requirements, and helps reduce the risk of foodborne illness by demonstrating safe food handling practices and sharing food safety knowledge with the food establishment's employees. MDH administers the Minnesota CFPM program for MDH, MDA and delegated agencies.

## Minnesota Food Code

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CFPM requirements for food establishments, exemptions, initial and renewal training requirements, and certification process

[Minnesota Food Code](http://www.health.state.mn.us/communities/environment/food/rules/foodcode/index.html)

(<http://www.health.state.mn.us/communities/environment/food/rules/foodcode/index.html>)

## CFPM Fact Sheet

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Information about CFPM duties in Minnesota, required training, initial and renewal certification, approved exams, application forms and frequently asked questions

[Minnesota Certified Food Protection Manager \(CFPM\). \(PDF\)](http://www.health.state.mn.us/communities/environment/food/docs/cfpm/mnccfpmfs.pdf)

(<http://www.health.state.mn.us/communities/environment/food/docs/cfpm/mnccfpmfs.pdf>)

## Initial and Renewal Process

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A description of required training, approved exams for initial certification, downloadable applications, and other useful tips

[Initial and Renewal Process](http://www.health.state.mn.us/communities/environment/food/cfpm/howto.html)

(<http://www.health.state.mn.us/communities/environment/food/cfpm/howto.html>)

## Instructors

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Instructor qualifications, continuing education course requirements, and application for instructors and courses

Instructors

(<http://www.health.state.mn.us/communities/environment/food/cfpm/inshow.html>)

## Tools and Resources

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CFPM look-up (search by name or FM number), initial course, exam and continuing education search tool, downloadable CFPM applications, and other helpful resources for CFPMs, CFPM instructors and environmental health professionals

Tools and Resources

(<http://www.health.state.mn.us/communities/environment/food/cfpm/cfertools.html>)

## CFPM Requirements

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All food establishments are required to employ a Certified Food Protection Manager (CFPM), except for those listed under the exemptions.

CFPM Requirements

(<http://www.health.state.mn.us/communities/environment/food/cfpm/require.html>)

Updated Saturday, 09-Mar-2019 10:48:17 CST



## Individuals applying for CFPM in the State of Minnesota

The commissioner of health will use information provided in this application to determine if you meet the requirements for certification. Submitting false information is grounds for denying your application or suspending, revoking or taking other disciplinary action against your certificate, if issued. Failure to provide required information may delay the processing of your application and may be grounds for denying your application.

For information on licensing data see Minnesota Statutes, section 13.41.

### Submit application

#### Before mailing, be sure to include the following

1. Completed and signed application form
2. Copy of your exam certificate
3. Check or money order (do not send cash) made payable to MDH for \$35

#### Mail to

Minnesota Department of Health  
Certified Food Protection Manager  
Food, Pools, and Lodging Services Section  
PO Box 64495  
St. Paul, MN 55164-0495

**Incomplete applications will be returned to the applicant.**

**Notice:** The issuance of a dishonored check to this department will require a service charge of \$30 per check as in Minnesota Statutes, section 604.113, subd.2 (a). Additional civil penalties may be imposed for non-payment.

I certify that the information provided and submitted on this application is accurate and complete.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Resources

#### [Initial Minnesota CFPM](https://www.health.state.mn.us/communities/environment/food/cfpm/howto.html)

(<https://www.health.state.mn.us/communities/environment/food/cfpm/howto.html>)

#### [ANSI-CFP Accreditation Program](https://www.ansi.org/Accreditation/credentialing/personnel-certification/food-protection-manager/ALLdirectoryListing?menuID=8&prgID=8&statusID=4)

(<https://www.ansi.org/Accreditation/credentialing/personnel-certification/food-protection-manager/ALLdirectoryListing?menuID=8&prgID=8&statusID=4>)

Minnesota Department of Health  
Food, Pools, and Lodging Services Section  
651-201-4500  
health.foodlodging@state.mn.us  
www.health.state.mn.us

November 2019

*To obtain this information in a different format,  
call: 651-201-4500.*

# **Food Establishment Construction Guide**

FOOD, POOLS, AND LODGING SERVICES

FEBRUARY 2019

## **Food Establishment Construction Guide**

JANUARY 2019

Minnesota Department of Health  
Food, Pools, and Lodging Services  
PO Box 64975  
St. Paul, MN 55164-0975  
651-201-4500  
[health.foodlodging@state.mn.us](mailto:health.foodlodging@state.mn.us)  
[www.health.state.mn.us](http://www.health.state.mn.us)

*To obtain this information in a different format, call: 651-201-4500. Printed on recycled paper.*

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FOOD ESTABLISHMENT CONSTRUCTION GUIDE

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## Purpose

This guide will help individuals or groups submit food establishment plans to the Minnesota Department of Health (MDH). Construction, equipment, and physical facility standards outlined in this guide are Minnesota Food Code ([www.health.state.mn.us/communities/environment/food/rules/foodcode/index.html](http://www.health.state.mn.us/communities/environment/food/rules/foodcode/index.html)) minimum requirements.

In Minnesota, different agencies license food and beverage establishments. The food establishment's menu and location of operation determine which agency is responsible for plan review, licensing and inspection. To find out which agency is responsible, visit the MDH Licensing ([www.health.state.mn.us/communities/environment/food/license/index.html](http://www.health.state.mn.us/communities/environment/food/license/index.html)) website or call MDH at 651-201-4500.

## Definitions

### Food and beverage service establishment

*“Food and beverage service establishment” means a building, structure, enclosure, or any part of a building, structure, or enclosure used as, maintained as, advertised as, or held out to be an operation that prepares, serves, or otherwise provides food or beverages, or both, for human consumption. – Minnesota Statutes, section 157.15, subdivision 5*

### HACCP plan

*“Hazard analysis critical control point (HACCP) plan” means a written document that delineates the formal procedures for following the HACCP principles developed by the National Advisory Committee on Microbiological Criteria for Foods. – Minnesota Statutes, section 157.15, subdivision 17*

### Food catering

*“Food catering” means food that is prepared for service in support of an event with a predetermined guest list such as a reception, party, luncheon, conference, ceremony, or trade show. A food establishment doing catering is responsible for maintaining control of and ensuring the safety of the food from preparation to service to the consumer. – Minnesota Rules, part 4626.0020, subpart 32a*

## Restrictions

### HACCP plan review

Specialized Processes in Retail Food Establishments ([www.health.state.mn.us/communities/environment/food/docs/fs/specialprofs.pdf](http://www.health.state.mn.us/communities/environment/food/docs/fs/specialprofs.pdf)) require a HACCP plan review.

## Catering

Preparing, storing, transporting, and serving large volumes of food at catered events presents increased food safety risks. Include catering operations in the project description so that equipment needs specific to [Catering \(www.health.state.mn.us/communities/environment/food/docs/fs/cateringfs.pdf\)](http://www.health.state.mn.us/communities/environment/food/docs/fs/cateringfs.pdf) are considered during the plan review process.

## Approved source

Food establishments must not use or serve food that was stored or prepared in a private home. All food prepared, sold or served in a food establishment must come from [Approved Sources for Food Products \(www.health.state.mn.us/communities/environment/food/docs/fs/apprvsrcefs.pdf\)](http://www.health.state.mn.us/communities/environment/food/docs/fs/apprvsrcefs.pdf).

## Plan Submittal and Review

### Projects that require plan review

- New construction  
 [\(www.health.state.mn.us/communities/environment/food/docs/license/newconstrplanapp.pdf\)](http://www.health.state.mn.us/communities/environment/food/docs/license/newconstrplanapp.pdf): A building that is newly constructed or conversion of an existing building for use as a food establishment.
- Remodel or addition  
 [\(www.health.state.mn.us/communities/environment/food/docs/license/remaddplanapp.pdf\)](http://www.health.state.mn.us/communities/environment/food/docs/license/remaddplanapp.pdf): The extensive remodeling of a food establishment or a change of type of food establishment or food operation if the regulatory authority determines that plans and specifications are necessary to ensure compliance.

Plans must be submitted to MDH at least 30 days before beginning construction, extensive remodeling or conversion of an existing structure to a food establishment. Changes to your proposed plan may be required during the plan review process. If you begin work before plans are approved, MDH may order work to stop when it determines work may lead to noncompliance. – Minnesota Rules, part 4626.1720, subpart D and F

Please contact MDH at 651-201-4500 if you have questions about whether a plan review is needed for your food establishment.

### Plan review process

1. Submit your plan review application, all required information and appropriate fee to:

Mailing Address	Street Address
Minnesota Department of Health Food, Pools, and Lodging Services – Plan Review P.O. Box 64975 St. Paul, MN 55164-0975	Minnesota Department of Health Orville L. Freeman Building 625 Robert Street North St. Paul, MN 55155

Plan review applications:

- [New Construction \(www.health.state.mn.us/communities/environment/food/docs/license/newconstrplanapp.pdf\)](http://www.health.state.mn.us/communities/environment/food/docs/license/newconstrplanapp.pdf)
- [Remodel or Addition \(www.health.state.mn.us/communities/environment/food/docs/license/remaddplanapp.pdf\)](http://www.health.state.mn.us/communities/environment/food/docs/license/remaddplanapp.pdf)

Please contact MDH at 651-201-4500 if you have questions about which application to use.

2. Plan review applications are reviewed in the order they are received. Submit all required information listed in the Required Plan Contents section of this guide. If your application is incomplete, the review process may take longer.
3. Your plan reviewer will notify you when review starts, and will contact you to request any missing or additional information.
4. When review is complete, you will receive a letter approving your plans.
5. Wait to begin your project until after plans are approved.

## Minnesota Department of Labor and Industry (DLI)

### Plumbing plan review

Plumbing must be designed, constructed, installed and maintained according to [Minnesota Rules, chapter 4714 \(www.revisor.mn.gov/rules/4714/\)](http://www.revisor.mn.gov/rules/4714/), Minnesota plumbing code.

The Minnesota Department of Labor and Industry (DLI) reviews plans for proposed plumbing projects and conducts inspections to ensure compliance with the Minnesota plumbing code. Contact a licensed plumbing contractor for assistance with preparing and submitting plumbing plans. After the plumbing system is installed, DLI will conduct an inspection of the system.

For further information and plan review applications, visit the DLI [Plumbing Plan Review \(www.doli.state.mn.us/business/get-licenses-and-permits/plumbing-plan-review\)](http://www.doli.state.mn.us/business/get-licenses-and-permits/plumbing-plan-review) website or contact DLI at 651-284-5063 or 1-800-342-5354.

### Local code lookup

Use the DLI [Local Code Lookup \(workplace.doli.state.mn.us/jurisdiction/\)](http://workplace.doli.state.mn.us/jurisdiction/) search tool to find out whom to contact with questions about how building, plumbing, electrical and mechanical codes apply to your project.

## Required plan contents

Make sure to include all the following when you submit your completed plan review application and the required fees.

- The intended menu.
- A description of the proposed project including the anticipated volume of food to be stored, prepared, sold or served.
- Easily readable layout drawn to scale indicating the location of all equipment (e.g., cooking equipment, ventilation hood, refrigerators, food prep counters, handwashing sink(s), three-compartment sink, and food prep sink).

- Finish materials for floors, base coves, walls, and ceilings.
- Proposed equipment list that includes types, manufacturers and model numbers.
- Manufacturer’s specification sheets for new equipment.
- Counters and cabinetry shop drawings, indicating cabinet construction, and countertop finish.
- The source of water (private or public) for your food establishment. Include unique well number for private systems.
- The method of sewage disposal (public or private) for your food establishment. Include individual sewage treatment system certificate of compliance for individual sewage disposal systems.
- A copy of the zoning approval or building permit from the local unit of government.

HACCP plan review submittals, if required, must include:

- HACCP Plan Review Submittal Form
- All supporting documents relating to your establishment’s HACCP plan
- \$500 HACCP plan review fee (payable to Minnesota Department of Health)

Additional information may be requested during the plan review process to allow for a thorough review. For further information, please visit the MDH [Plan Review](http://www.health.state.mn.us/communities/environment/food/license/planreview.html) ([www.health.state.mn.us/communities/environment/food/license/planreview.html](http://www.health.state.mn.us/communities/environment/food/license/planreview.html)) website, or contact MDH at 651-201-4500.

## Licensing and preoperational inspections

Once your project is near completion, follow these steps:

### 1. Apply for license.

Contact MDH staff listed on your plan review approval letter to request a license application. Submit the completed license application and required license fee prior to the preoperational inspection. **The license fee is separate from the plan review fee.**

### 2. Have your food establishment inspected.

Contact MDH staff listed on the plan review letter 14 days before the intended opening date to schedule a preoperational inspection. The inspection will cover all aspects of your approved project, including:

- Equipment is present, correctly installed and operational.
- Floor, wall and ceiling finishes are installed as approved.
- Mechanical and plumbing installations are approved by the appropriate authority.

### 3. Post the license in the food establishment.

After a successful preoperational inspection, MDH will issue a license. Prominently post the original license in the food establishment at all times. The license is valid for one year and must be renewed annually.

## General Equipment Information

Include specifications, proposed locations and intended use for all new and used equipment in submitted plan. Menu and food processes determine the type of equipment required. Complex food processes may require additional or specialized equipment.

### Equipment design and construction

Some equipment must be certified or classified for sanitation by an American National Standards Institute (ANSI) accredited certification program for food service equipment and include:

- Manual warewashing sinks
- Mechanical warewashing equipment
- Mechanical refrigeration units except for reach-in or chest freezers
- Walk-in freezers
- Food hot-holding equipment
- Cooking equipment, except for microwave ovens and toasters
- Ice machines
- Mechanical slicers
- Mechanical tenderizers and grinders
- Food preparation surfaces including sinks used for food preparation

If there is no certification or classification for sanitation by an ANSI accredited certification program for a piece of equipment, the equipment must:

- Be designed for commercial use.
- Be durable, smooth, and easily cleanable.
- Be readily accessible for cleaning.
- Have food-contact surfaces that are not toxic.

### Most common ANSI accredited certification programs

Certifying Group	Mark
NSF International (NSF)	
Intertek Marked "ETL Sanitation."	
Underwriters Laboratory (UL) Marked "Classified UL EPH."	
Canadian Standards Association (CSA) Marked "CSA Sanitation to NSF/ANSI."	
Baking Industry Sanitation Standards Committee (BISSC) Marked "Certified BISSC."	

## Equipment numbers and capacities

Provide mechanical equipment that meets the cooking, cooling, re-heating, ventilation and hot and cold holding needs of the food establishment. Install and use equipment as intended by the manufacturer.

Some common circumstances with special equipment requirements include:

- Walk-in refrigeration units installed outside must be designed for extra structural loads from snow and ice.
- Food guards, display cases or other effective means must be provided to protect unpackaged food from contamination while on display.
- Food grade containers capable of maintaining food at proper hot and cold holding temperatures in a sanitary manner are required for delivery or catering.

## Equipment locations and installation

Locate or install equipment so that food and food-contact surfaces are not exposed to contamination and the areas around and beneath the equipment are accessible for cleaning.

If equipment is not easily moveable, seal it to the surface or mount it on legs.

- Four-inch legs are required for table-mounted equipment.

## FOOD ESTABLISHMENT CONSTRUCTION GUIDE

- Six-inch legs are required for floor-mounted equipment.

Examples of equipment and storage locations that are frequently submitted but **not approved** include:

- Under an open stairwell
- In a mechanical room
- In a garbage room
- Under a sewer line that is not shielded
- In a toilet room
- Under piping on which water has condensed
- Above unprotected food, such as beverage dispensing equipment above an ice bin

## Sinks

Include specifications, proposed locations and intended use for all sinks.

### Handwashing sinks

Install handwashing sinks to provide easy access for all employees who are:

- Preparing or dispensing food and beverages.
- Conducting warewashing.
- Using the toilet room.

Each handwashing sink must be equipped to provide water at a temperature to allow handwashing for at least 15 seconds through a mixing valve or combination faucet. A self-closing, slow-closing, or metering faucet must provide a flow of water for at least 15 seconds without the need to reactivate the faucet.

MDH may require splash guards on handwashing sinks to limit contamination of food, clean equipment and utensils, and single-service and single-use articles.

### Manual warewashing sink

If your plans do not include a warewashing machine that can accommodate the largest piece of equipment and utensils, provide equipment for manual warewashing.

Provide a sink with at least three compartments and drainboards on each end. All compartments and the drainboards must be part of the same piece of equipment. You cannot attach drainboards to meet this requirement. Utensil racks or tables may be required for storing all dirty and clean equipment and utensils.

Sink compartments must be large enough to allow immersion of the largest piece of equipment and utensils.

Manual warewashing sinks must be certified or classified for sanitation by an American National Standards Institute (ANSI) accredited certification program.

### Food preparation sink

Provide a designated food preparation sink if the proposed menu includes a food product that requires washing or thawing in a sink.

Food preparation sinks must be certified or classified for sanitation by an American National Standards Institute (ANSI) accredited certification program.

### Service sink

Provide one conveniently located service sink or curbed cleaning facility equipped with a floor drain for the cleaning of mops or similar wet floor cleaning tools, and for the disposal of mop water and similar liquid waste. In your plans, include a way to store mops between uses so that they do not soil or damage walls, equipment or supplies.

## Other sinks

The sinks listed above have use limitations. Other common sinks used in a food establishment may include:

- Dump sink – for bars, blender drinks and espresso areas.
- Dipper well sink – for in-use utensils such as ice cream scoops.

## Warewashing Machines

Include specifications and proposed locations for all warewashing machines. Drainboards, utensil racks, or tables are required for storing dirty and clean equipment and utensils.

Warewashing machines must be certified or classified for sanitation by an American National Standards Institute (ANSI) accredited certification program.

## Chemical sanitizing

Component	Requirement
<b>Sanitizer alarm</b>	Audible or visual indicator of low sanitizer level
<b>Space for air-drying</b>	Minimum of five racks
<b>Pre-cleaning area</b>	Spray sink, garbage disposal or other means for disposal of garbage
<b>Interlocking door device (ventless dish machines)</b>	Prevents the door from opening until the vent cycle operation is complete May be an additional accessory for the machine

## Hot water sanitizing

Component	Requirement
<b>Space for drying</b>	Minimum of three racks
<b>Pre-cleaning area</b>	Spray sink, garbage disposal or other means for disposal of garbage
<b>Interlocking door device (ventless dish machines)</b>	Prevents the door from opening until the vent cycle operation is complete May be an additional accessory for the machine

## Ventilation Systems

Include specifications and proposed locations for ventilation hoods in submitted plans. Design and install ventilation systems according to Minnesota Rules, chapter 1346 ([www.revisor.mn.gov/rules/1346/](http://www.revisor.mn.gov/rules/1346/)), Minnesota mechanical and fuel gas code. Minnesota Rules, part 1346.0507 ([www.revisor.mn.gov/rules/1346.0507/](http://www.revisor.mn.gov/rules/1346.0507/)) provides commercial kitchen hood requirements for some equipment.

Ventilation hood systems and devices must be sufficient in number and capacity to prevent grease or condensation from collecting on walls and ceilings. Adequate ventilation and make-up air is required for equipment that produces excessive steam, condensation, vapors, obnoxious or disagreeable odors, smoke and fumes.

Design ventilation systems to prevent grease or condensation from draining or dripping onto food, equipment, utensils, walls, ceiling, linens and single-service articles. Grease filters used in an exhaust ventilation hood or other grease extracting equipment must be designed to be readily removable for cleaning and/or replacing if not designed to be cleaned in place.

## Counters, Cabinetry and Tables

Include specifications, proposed locations and intended uses for all counters, cabinetry, tables, and customer self-service areas in submitted plans.

### Food-contact surfaces

A food-contact surface is a surface of equipment or utensil that directly contacts food. Food-contact surface also includes a surface of equipment or utensil from which food may drain, drip or splash, such as an interior of a reach-in cooler.

Food-contact surfaces must be certified or classified for sanitation by an American National Standards Institute (ANSI) accredited certification program.

Food-contact surfaces must be:

- Safe
- Durable, corrosion-resistant and nonabsorbent
- Sufficient in weight and thickness to withstand repeated warewashing
- Finished to have smooth, easily cleanable surface
- Resistant to pitting, chipping, crazing, scratching, scoring, distortion, and decomposition

Examples of activities requiring approved food-contact surfaces include:

- Chopping, cutting or mixing raw foods
- Cooking foods using equipment such as grills, deep fryers, flat tops, or ovens
- Assembling foods such as sandwiches or salads
- Storing equipment before and after warewashing
- Other activities creating splash, food soiling or requiring frequent cleaning.

## Non-food-contact surfaces

A non-food contact surface is a surface of equipment that does not directly contact food, such as surfaces of millwork and cabinetry. Non-food-contact surfaces of equipment that are exposed to splash, spillage, other food soiling or that require frequent cleaning must be constructed of a corrosion-resistant, nonabsorbent, and smooth material.

Non-food-contact surfaces must be free of unnecessary ledges, projections, and crevices, and designed and constructed to allow easy cleaning and to facilitate maintenance.

Examples of areas with non-food contact surfaces include:

- Beverage service areas for beverage dispensers such as espresso or coffee machines, or pop dispensers
- Customer self-service areas such as condiment display stations
- Cashier or ordering areas at bar or wait stations

Unfinished wood is not allowed. All surfaces (e.g., cutouts in millwork, underside of countertops and shelving) must be properly finished. Cabinets with enclosed hollow bases are prohibited. Base cabinets must be provided with six-inch legs or a solid base.

## Floors, Walls and Ceilings

Include proposed finish materials for all floor, wall and ceiling surfaces. Provide smooth, nonabsorbent, durable and easily cleanable floors, walls and ceilings in the following areas:

- Food and beverage preparation areas
- Walk-in refrigerators or freezers
- Warewashing areas
- Toilet rooms
- Servicing areas
- Service sink areas
- Dry storage
- Areas subject to flushing or spray cleaning methods

Prior to selecting floor, wall and ceiling surfaces, owners, design professionals, and others involved in preparing the plans should consider the following factors:

- Type and amount of use
- Type of soil and cleaning methods
- Life span of the surface

## Floors

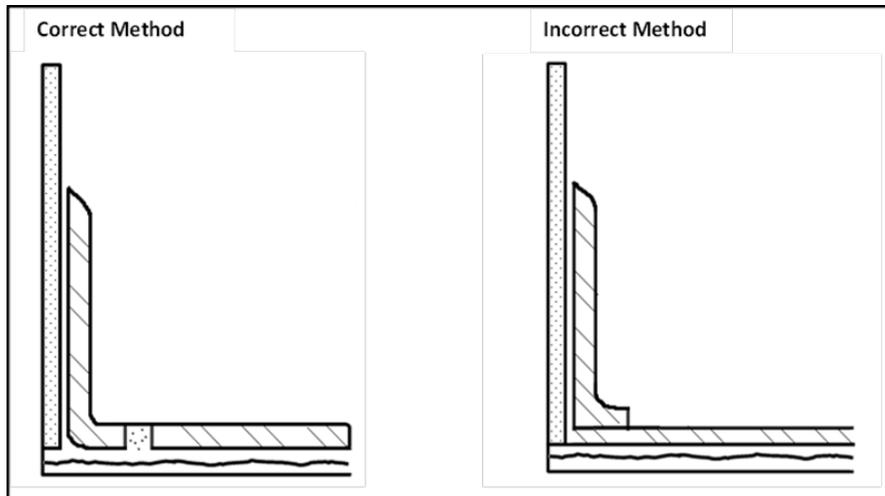
Select and install flooring surfaces that meet the needs of your establishment. Follow all manufacturer's recommendations.

Some specific restrictions are:

- Sealed concrete is not allowed except in garbage rooms, or areas used for closed case lot storage.

- Carpeting is not allowed within three feet of permanently installed bars and salad bars and other food service equipment.
- Mats and duckboards must be designed to be removable and easily cleanable.

Install a coved base at all floor-wall junctions. Select and install coved base according to manufacturer's specifications. Figure 1 shows correct and incorrect positioning of coved base tile relative to flooring surface.



**Figure 1**

## Walls and ceilings

Select and install wall and ceiling surfaces that meet the needs of your establishment. Follow all manufacturer's recommendations.

Some specific restrictions are:

- Unfinished, porous concrete blocks or bricks are not allowed except in dry storage areas.
- Light fixtures, vent covers, fans or other wall and ceiling attachments must be easily cleanable.
- Exposed studs, joists and rafters are not allowed except in areas used only for the storage of unopened packages.

## Non-food Areas

Include proposed locations for non-food areas such as toilet rooms, storage of employee personal items, garbage and recyclables and laundry facilities. Provide non-food areas to meet the needs of your establishment.

## Toilet rooms

If public toilet rooms are not available, provide at least one toilet and handwashing sink for employee use. Refer to Minnesota Rules, chapter 4714 ([www.revisor.mn.gov/rules/4714/](http://www.revisor.mn.gov/rules/4714/)), plumbing code, for minimum number of toilets required for your food establishment. Completely enclose the toilet room(s), and provide a tight-fitting and self-closing door.

## Garbage and recyclables

Provide an area separate from food preparation and storage areas for collection and storage of garbage and recyclable materials.

Use concrete, asphalt, or other nonabsorbent material for outdoor garbage and recyclable material storage areas. The pad must be smooth, durable and graded to drain.

## Personal items

Lockers or other suitable facilities must be used for the orderly storage of employee clothing and other possessions.

## Laundry facilities

If laundry facilities are provided on-site, locate the washer and dryer to prevent contamination of food, clean equipment, utensils, linens, or unwrapped single-service or single-use articles.

## Utilities

Include specific information for water supply, water heaters, sewage disposal system, and other utilities in submitted plans. Provide utilities to meet the needs of your food establishment.

Enclose utility service lines and pipes, including beverage lines. Install utilities so they do not obstruct or prevent cleaning of the floors, walls and ceilings.

## Water supply

Identify the source of the water for your establishment in submitted plans.

A safe and adequate supply of water must be provided to meet the needs of your food establishment. Water for your establishment must be obtained from a municipal water supply or a water supply that meets the requirements of Minnesota Rules, chapter 4720 ([www.revisor.mn.gov/rules/4720/](http://www.revisor.mn.gov/rules/4720/)), Public Water Supplies; and chapter 4725 ([www.revisor.mn.gov/rules/4725/](http://www.revisor.mn.gov/rules/4725/)), Wells and Borings.

A representative from the Minnesota Department of Health may conduct an onsite evaluation of your water supply prior to licensing your establishment.

## Water heaters

Include specifications and proposed locations for water heaters in submitted plans. Select and install water heaters (traditional and tankless) that are adequately sized to meet the peak hot water demands of the food establishment.

## Sewage disposal

Identify the method of sewage disposal (public or private) for your food establishment in submitted plans. Provide a sewage disposal system that meets the peak sewage needs of your food establishment.

Septic systems must be designed, installed and maintained according to Minnesota Rules, chapter 7080 ([www.revisor.mn.gov/rules/7080/](http://www.revisor.mn.gov/rules/7080/)), individual subsurface sewage treatment systems (SSTS) and Minnesota Rules, chapter 7081 ([www.revisor.mn.gov/rules/7081/](http://www.revisor.mn.gov/rules/7081/)), midsized subsurface sewage treatment systems.

Individual and midsized SSTS requirements are adopted and enforced locally. A copy of the individual sewage treatment system certificate of compliance for individual sewage disposal systems must be provided with plans. For assistance, contact your local unit of government (county, city, or township).

## Lighting

Provide adequate lighting to meet the needs of your establishment. Use either shatter-resistant bulbs or shielded light fixtures.

Light intensity is measured 30 inches above the floor. Requirements vary depending on food activities:

- 10 foot-candles – walk-in coolers, walk-in freezers or dry storage areas
- 20 foot-candles – consumer self-service areas, inside reach-in and under-counter refrigerators, toilet rooms or areas used for handwashing, warewashing, and equipment and utensil storage
- 50 foot-candles – food preparation areas or where employee safety is a factor