

Dear Owner/Operator,

It is the responsibility of the Grundy County Health Department (GCHD) Environmental Health Division to ensure that food establishments are built and operate in accordance with the County's food code standards. The information provided herein describes the steps that need to be completed before a food service permit can be issued to operate a food establishment. *Please read this entire packet.*

PLAN REVIEW AND OPENING INSPECTION PROCESS

The following are the steps of the plan review and pre-opening inspection process:

1. All required material are received for the plan review, including the plan review fee.
2. The plan review is performed and a letter notifying the applicant of the results is prepared, with a copy sent to the appropriate building code enforcement agency.
 - a. If the plans are approved, the applicant will not need to contact us until they desire to set up a pre-opening inspection.
 - b. If the plans are not approved, the applicant will address the items in the correspondence and resubmit the materials as requested.
3. After the plans have been reviewed, GCHD may initiate site visits during construction at any time.
4. The person in charge of the project needs to contact GCHD to schedule a pre-opening inspection. This should be performed after all substantial construction activities are completed including floors, walls /wall coverings, ceilings, equipment installation and all utilities are installed and connected.
5. **NO FOOD OR FOOD RELATED STOCK MAY BE BROUGHT IN UNTIL THE FACILITY IS APPROVED FOR FOOD SERVICE PERMIT. PRE-OPENING INSPECTIONS AND PERMITTING MAY BE DELAYED UNTIL ITEMS ARE REMOVED FROM THE PREMISES.**
6. The person in charge of the project needs to contact GCHD to schedule an opening inspection. *No Food handling may be performed until the facility has been approved for a Food service permit. The Annual Food service permit application and fee must be submitted before the final inspection of a facility will be approved.*
7. After the facility is approved, the appropriate building code enforcement agency will be notified.

BOARD OF HEALTH

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Public Health
Prevent. Promote. Protect.
Grundy County Health Department

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www.grundyhealth.com
GCHDIL@grundyhealth.com

PLAN REVIEW SUBMISSION REQUIREMENTS

1. Complete the plan review application (attached), please complete all sections and accurate contact information.
2. Provide a complete set of plan showing the facility's layout to include:
 - a) For New facilities:
 - i. Plans that are drawn to scale.
 - ii. Plan sheets that are accurate from page-to-page reflecting common dimensions, layouts and equipment.
 - b) For Remodeling:
 - i. Plans that are drawn to scale that reflect existing walls or to be removed.
 - ii. Plans must identify equipment or facilities that will remain.
 - iii. Plans are to be accurate from page-to-page reflecting common dimensions, layouts and equipment.
3. Provide copies of equipment specification sheets for food handling, processing and storage equipment. Equipment schedule is preferred.
4. Plumbing installation and repairs can only be completed by a licensed plumber, work invoices and/or proof of completion, required. Plumbing schedule also preferred.
5. Provide a room finish schedule (attached). If provided in drawings this is not required.
6. Provide a draft menu. This helps us to access the risk level of the facility and the types of food handling activities that will take place and equipment needs.
7. The Plan review fee must be submitted with the application. If the fee is not included, the plan review application will NOT be processed. Payments can be made online, by check or cash.
8. Upon completion of the initial plan review, information or clarification may be requested by mail or email. This correspondence will state that the plans are not yet approved. All items must be completed prior to approval. A copy of the letter will be provided to the appropriate building code enforcement agency.
9. The review and response process will be ongoing until all information or clarification is provided. Once complete an approval letter stating you may proceed with the construction activities will be emailed and mailed. A copy of the letter will be provided to the appropriate building code enforcement agency.
10. A pre-operational inspection and opening inspection will be completed upon final construction and before any permit will be issued.

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GENERAL DESIGN REQUIREMENTS

1. All food preparation must be supervised by a Certified Food Protection Managers. All food handlers must obtain ANSI approved Food Handler training.
2. All establishments must have an approved source of water and sewage disposal. If a facility is proposed to be served by an existing private sewage disposal system, the adequacy of the system for the proposed facility will need to be determined during the plan review process.
3. Ceilings in all food storage, food prep, self-service and restroom areas must be smooth, easily cleanable, durable, and light in color such as vinyl coated gypsum board or other approved material. Acoustic ceiling tiles are NOT approved.
4. Walls must be constructed of durable material, smooth, easily cleanable and light in color. Drywall must be painted with high-gloss, light colored paint.
5. Floors of all food preparation, food storage, ware washing areas and restrooms must be constructed of commercial grade VCT, ceramic, or quarry tile or other approved floor. The juncture between walls and floors must have a coved base constructed of the same material.
6. All equipment that produces grease and/smoke must be equipped with a grease extraction hood. *The proposed exhaust hood and fire suppression system design is to be reviewed by either the building and/or fire agency having code authority over this matter.*
7. All food processing, storage display or other equipment must bare the seal of the National Sanitation Foundation (NSF) or equivalent standard.
8. All permanent equipment must be installed to be easily cleaned on all sides by maintaining 18" from all walls and 6" off the floor, or by mounting the equipment on casters so that it is easily moved to facilitate regular cleaning.
9. Three-compartment sinks are to be equipped with two drain boards, lockable drain plugs for each compartment, an adequately sized faucet and an indirect connection to the sewer.
10. Indirect connections to the sewer are required at the waste lines of all prep sinks, three-compartment sinks, dishwashers, ice machines, soda dispensers, beer taps, walk-in coolers/freezers, or any equipment requiring drainage. Floor drains are not permitted in walk-in coolers/freezers.
11. Hand sinks must be conveniently located near all food prep, food service and ware washing areas. Hand sinks must be provided with hot and cold running water, soap and disposable paper towels. Metered faucets must run for no less than 15 seconds. A waste container must be located near the hand sink. A handwashing sing must also be provided at each hand sink.
12. A mop sink or basin is required and must be equipped with a vacuum breaker. A mop hanging device capable of holding a commercial type mop while wet is also required and should be positioned above the mop sink or basin.
13. If a grease trap is to be installed, it must be properly sized and should be recessed into the floor to provide a flush and cleanable surface.
14. All exterior doors must be self-closing and tight fitting.
15. All restrooms must have self-closing doors and mechanical ventilation.
16. Dumpsters must be located on a concrete or asphalt and equipped with lids in good repair.
17. Prior to operating, a food service establishment must have a probe thermometer (recommend digital) with a range of 0 degrees Fahrenheit to 200 degrees Fahrenheit, disposable gloves, hair restraints and approved sanitizer with compatible test strip kits.

If you have any questions, please feel free to contact this department at 815-941-3115 or email lwells@grundyhealth.com.

Laura Wells
Grundy County Health Department
Director of Environmental Healt

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PLAN REVIEW APPLICATION

(Please print and fill out ALL sections)

NAME OF ESTABLISHMENT _____

SITE ADDRESS _____ CITY _____ STATE _____

ZIP CODE _____ *PHONE _____ EMAIL _____

OWNER'S NAME (or Agent if Corp.) _____

ADDRESS _____ CITY _____ STATE _____

ZIP CODE _____ *PHONE _____ EMAIL _____

PROJECT MANAGER _____

ADDRESS _____ CITY _____ STATE _____

ZIP CODE _____ PHONE _____ EMAIL _____

PLAN REVIEW MATERIALS CHECK OFF LIST:

- ☐ Plan review application
- ☐ Payment
- ☐ Plan of facility drawn to scale including plumbing schematic.
- ☐ Equipment specification sheets and/or equipment schedule included on plans.
- ☐ Room finish schedule (unless included in plan drawings)
- ☐ Preliminary menu

PROPOSED SEATING CAPACITY _____ PROPOSED BUILDING SIZE _____

CONSTRUCTION/REMODELING IS (Circle one)
NEW/COMPLETE REMODEL PARTIAL REMODEL

PLAN REVIEW FEE \$500

PLAN REVIEW PARTIAL REMODEL FEE \$250.00

****IF WORK IS STARTED BEFORE PLANS ARE REVIEWED AND APPROVED BY GCHD +25% FEE WILL APPLY****

MAKE CHECK OR MONEY ORDER PAYABLE TO: GRUNDY COUNTY HEALTH DEPARTMENT

Online payment link : <https://magic.collectorsolutions.com/magic-ui/Login/grundy-county-health-department>

Please forward confirmation of CC payment to: environmentalhealth@grundycountyil.gov

PERMIT FEE/RENEWAL APPLICATION DUE BY JANUARY 31 or 25% LATE FEE WILL BE APPLIED

(FOR OFFICE USE ONLY)

RECEIPT# _____ AMOUNT PAID _____ DATE PAID _____

CHECK # _____ CASH _____ CC AUTHORIZATION #: _____ RECEIVED BY _____

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ROOM FINISH SCHEDULE

This information page is required

Room/ Area	Floor Finish	Coved Base Material	Wall Finish	Ceiling Finish
Food Prep/Kitchen				
Ware Washing				
Food & Paper Goods Storage				
Walk-in Refrigerator / Freezer				
Mop / Janitorial				
Waitress Station				
Bar				
Restroom# 1				
Restroom# 2				
Self Service				
Buffet / SaladBar				
Front Service Counter# 1				
Front Service Counter# 2				
Dining Area				

Please remember to attach, floor plans, equipment, and plumbing schedules

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