

Application for food premises plan review

Please submit the following application with two (2) sets of plans
(see contact details below).

FOOD PREMISES INFORMATION

Name of Owner/Operator:			
Name of Premises:			
Address:			
Postal Code:		Telephone No.:	
Name of Applicant:			
Position of Applicant:		Telephone No.:	
Anticipated Start Date		Anticipated Completion Date	
<input type="checkbox"/> New Premises	<input type="checkbox"/> Premises Under Renovation	Private Water: <input type="checkbox"/> Yes <input type="checkbox"/> No	Private Sewage: <input type="checkbox"/> Yes <input type="checkbox"/> No

TYPE OF FOOD PREPARATION	TYPE OF EQUIPMENT	
<input type="checkbox"/> No on-site preparation <input type="checkbox"/> Pre-packaged foods (no preparation or cooking required) <input type="checkbox"/> Non-hazardous foods (e.g. vegetables/fruits) to be prepared or cooked <input type="checkbox"/> Hazardous foods (e.g. dairy, fish, meat, poultry) to be prepared and cooked	Sinks: <input type="checkbox"/> Separate Handwashing Basin (Provided within each food preparation area) <input type="checkbox"/> Two-compartment Sink <input type="checkbox"/> Three-compartment Sink <input type="checkbox"/> Food Preparation Sink <input type="checkbox"/> Janitorial Sink Utensils for Patrons: <input type="checkbox"/> Single Use (i.e. disposable) <input type="checkbox"/> Multi-use Utensils (i.e. reusable cutlery and dishware)	Equipment: <input type="checkbox"/> Cooking Equipment <input type="checkbox"/> Mechanical Ventilation <input type="checkbox"/> Hot Holding Equipment <input type="checkbox"/> Refrigerator <input type="checkbox"/> Freezer <input type="checkbox"/> Commercial Mechanical Dishwasher <input type="checkbox"/> Other:

OFFICE USE ONLY

Nexus #:		Area No.:	
Approval Date:		District PHI:	
Approval Date:		Second PHI:	

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