



CITY OF PEABODY
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Food Establishment Plan Review Application

Establishment Name: _____

Establishment Address: _____

Applicant Name: _____ Applicant Phone: _____

Plan Review Fee: 0 – 100 SEATS \$100.00 >100 SEATS \$150.00

Circle One: NEW REMODEL ADDITION

Projected Start Date: _____

Projected Completion Date: _____

Supply Delivery Schedule (estimated), Days of Week/ Hours: _____

Anticipated number of meals to be served daily: _____

PLEASE ENCLOSE THE FOLLOWING DOCUMENTS, SUMMARY SHEETS

A: Proposed Menu

B: Site Plan, including location of outside equipment such as; refrigeration units, dumpster, grease interceptor.

C: Food Establishment Plan Shall Include:

I: Name and Title of Designer and Contractor (include contact information).

II: Total Square Feet of Facility.

III: Location of all equipment, including storage of maintenance tools (broom, mop..).

IV: Comprehensive dry storage specifications, i.e. depths of shelves, total linear feet of shelving, storeroom floor area in sqft.

V: Summary of hot water supply requirements.

VI: Summary of reach-in cooler and walk-in cooler space in gross cubic feet (cuft).

VII: Summary of reach-in freezer and walk-in freezer space in gross cubic feet (cuft).

VIII: Material specifications for floors, ceilings and walls

IX: Evidence that standard procedures that ensure compliance with requirements of Federal Food Code are developed or are being developed.

Failure to provide the complete information could result in a delay of the plan review process