

Food Establishment New Ownership Packet

- ✓ Submit this form along with your food establishment application when there is a change of ownership of a food establishment which does not result in any changes to the menu, food preparation procedures or equipment/facilities.
- ✓ A current menu, floor plan, equipment schedule and ill food worker policy are required. These items are used to help us verify that no changes to the menu or facilities have been made.

(PLEASE PRINT)

New Name of Food Establishment:	
Previous Name of Establishment:	
Site Address:	City, State, Zip:
Contact Person:	Phone: ()
New Owner Name:	Phone: ()
Mailing Address:	City, State, Zip:
Email Address:	
Previous Owner Name:	Phone: ()

This Application must be submitted with the following items:

<input checked="" type="checkbox"/>	ITEM #	ITEM	DESCRIPTION
	1	Business details	Provide details of the daily business of this Food Establishment. Use "Attachment A".
	2	Menu	Provide a copy of the menu or detailed list of all the foods and drinks you will be serving. Include Attachment B.
	3	Food Preparation Methods	Describe preparation methods of each menu item. Include all steps: cold-holding, thawing, prepping, assembling, cooking, hot-holding, cooling, etc. You may use the "food prep methods table" (Attachment C) or you may use your own format (as long as all the required information is included).
	4	Floor Plan	Provide a scaled floor plan drawing showing the layout of the food establishment. Indicate the type and location of all facilities and equipment (sinks, refrigeration, etc.). Show restrooms, work areas, ware-washing, storage, and customer dining areas.
	5	Ill Food Worker Policy	Include your written policy regarding restricting and excluding ill food workers. See the "ill food worker policy" guidance document to create your policy if you do not already have one.

Signature _____ Title _____ Date _____

Plan Review Attachment A: Business Details

1. Please circle the months of the year you plan to operate:

Jan. Feb. Mar. Apr. May. Jun. Jul. Aug. Sep. Oct. Nov. Dec.

2. Indicate weekly hours in the following table:

Day of week	Hours open (indicate a.m. or p.m.)
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

3. Indicate the number of customer seats:

Seating Area	Number of Seats
Dining	
Lounge	
Outdoor	
Banquet	
Other: _____	
	Total=

5. Indicate shift times and expected number employees per shift:

Shift time	Number of employees
(Example) 7 am to 4 pm	5

4. Estimate the daily number of meals/beverages to be served:

Meal	Number served daily
Breakfast	
Lunch	
Dinner	
Beverage only	
Other: _____	
	Total=



GRANT COUNTY HEALTH DISTRICT

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Food Establishment Plan Review-Attachment B:

Mandatory Consumer Advisory for Raw or Undercooked Foods

Raw or undercooked food of animal origin (meat, eggs, seafood) or packaged unpasteurized juices offered for sale as ready-to-eat food must be readily identified to customers on the menu, labels, or clearly visible signage/placards. Examples include raw fish sushi, raw oysters on the half shell, salad dressings, mayonnaise, and other sauces containing raw eggs, ceviche made with raw fish or seafood, unpasteurized fruit and vegetable juices that are packaged, eggs and steaks undercooked per customer specification, etc.

The consumer advisory must consist of two parts:

1. **Disclosure** - a written statement or description that clearly identifies the menu item as raw, undercooked or unpasteurized, may be ordered undercooked, or contains an ingredient that is raw, undercooked or unpasteurized.
2. **Reminder** - a written statement that explains the increased health risk from consumption of the food or beverage. The “reminder” statement must be connected to the menu item through the use of an asterisk or other means.

Check this box if **no** raw or undercooked meats, eggs, seafood or unpasteurized juices will be offered for service at your food establishment. Please sign and date to confirm this statement.

_____ (SIGNATURE OF MANAGER/OWNER)

_____ (DATE)

If there will be raw, undercooked or unpasteurized foods as describe above served in your food establishment, please complete the following table:

Menu Item containing raw/undercooked food	What is the raw or undercooked product?
Example 1: Egg dishes	Eggs offered as sunny side up, over easy, soft boiled or poached per customer preference.
Example 2: House made Caesar salad dressing	Contains raw shell eggs as an ingredient
Example 3: Ceviche	Raw fish marinated in lime juice
1.	
2.	
3.	
4.	
5.	

Use the space below to write the consumer advisory that will be included in your menu. See the back of this page for examples of consumer advisories and details of the rule as stated in the Food Code. *If your menu is complete and already includes consumer advisories that satisfy the rule, please include the menu and write “see attached menu” below.

