



**Municipality of Anchorage**  
**Health Department**  
Environmental Health Services, Food Safety & Sanitation Program  
825 L Street  
907-343-4200 [www.muni.org/health](http://www.muni.org/health)



## **Plan Review Application Requirements Checklist**

Your plan review application will not be accepted until you have provided all the required information. Please check each item on the list to confirm it is included with your application and sign the form to acknowledge that you are submitting a complete application.

***Failure to submit a complete plan review may cause approval delays and incur additional plan review fees. Plan review success depends on the quality of your application.***

Below is a checklist of the items and information that must be submitted with the plan application.

1. **Application for Plan Review** – Complete and submit the AHD plan review application form. Ensure that all information is legible and correct. Please include all contact information, including phone number(s), fax number, and email address(es).
2. **Proposed Menu** – Submit a complete proposed menu detailing all food and beverages that will be served. This information will help determine the types of equipment required, and the work and storage space you will need.
3. **Standard Operating Procedures (SOPs)** – SOPs may be required if your facility is doing any specialized processes, such as those requiring a Hazard Analysis Critical Control Point (HACCP) plan, Reduced Oxygen Packaging (ROP) methods, or using acidification or water activity to prevent growth of pathogenic organisms. Please note that a variance may be required for these processes.
4. **Fees** – Fees are charged for the review based on the square footage of the facility, including associated areas such as dining areas, restrooms, mechanical areas, and utility rooms. The plan review fee for facilities 0 to 1000 sq. ft. is \$220.00; for facilities 1001 to 4000 sq. ft. is \$330.00; and for facilities greater than 4000 sq. ft. is \$550.00. The fee for tax exempt non-profits is 50% of the review fee. Please note that the plan review fee does not include the annual Health Permit, which is separate and must be applied for after plans have been approved, and prior to scheduling the opening inspection.
5. **Plans** – One complete set of plans, to include:
  - a. **Site map** – Show the facility and surrounding area. Include the location of the trash area / dumpster (on an asphalt or cement pad, sloped to drain away from the building), and any remote storage areas.
  - b. **Floor plan** – Include all interior and exterior doors, toilets, dressing rooms, garbage and trash areas, mechanical and utility rooms, food preparation, dining, ware washing, offices, etc. on the plans. Clearly identify all rooms. Provide the square footage for the facility and indicate scale for determining area sizes.
  - c. **Equipment plan** – Show the proposed location of all equipment, including hood(s), water heater(s) and sinks. Identify the equipment with a letter or number, and provide an

- equipment schedule listing all the equipment. Provide elevations that show where sneeze or splash guards will be installed.
- d. **Equipment schedule** – Include the make and model for all equipment, including countertop equipment such as microwaves, blenders, etc. All equipment must be certified for sanitation standards by an ANSI accredited agency (NSF, UL, ETL, etc.).
  - e. **Specification (Cut) sheets** – Include manufacturer’s specification sheets for all equipment, identifying the sanitation standard certification and dimensions. When multiple models are presented on one sheet, identify which model will be used by the facility. Ensure that the water heater specification sheet indicates the model’s recovery rate (preferably in GPH at 90 F rise).
  - f. **Finish schedule** – Indicate for each area the complete finish schedule (type of material, surface finish) for the floors, walls, ceiling, and cove base. Cove base must be installed at all floor / wall junctures and should be sloped to prevent debris build up and for ease of cleaning.
  - g. **Plumbing plan** – Indicate sewer, waste drains, floor sinks, floor drains, grease interceptors, and all water supply lines. Ensure that there are no food, food preparation, or food service equipment storage areas under sewer lines that are not shielded to prevent contamination from potential leaks.
  - h. **Mechanical plan** – Include the hood exhaust ventilation system layout and room ventilation (e.g. in restrooms). Provide elevations showing how the hood is positioned over cooking equipment.
  - i. **Electrical plan** – Include the type of lighting to be used in each area. Ensure that lights are shielded or shatterproof in areas where there is exposed food, clean equipment, utensils and linens, or unwrapped single service / single use articles. Ensure that work areas are provided with a minimum lighting of 50 foot-candles or 538 LUX.
  - j. **Window and door schedules** – Indicate all windows and doors, including pass thru-windows. Ensure exterior doors are provided with weather strips or similar, to prevent pest entrance to the facility. Ensure restroom doors are self-closing.
  - k. **Water** – Indicate whether the facility is on a public or private water system. Private water systems must be approved.

**I understand that I have provided the required information to submit a complete plan review application. I understand that if information is missing or inaccurate, an additional fee may be charged, and the approval process delayed.**

Signed: \_\_\_\_\_

Please Print Name \_\_\_\_\_

Date: \_\_\_\_\_