



Gwinnett Environmental Health
 455 Grayson Highway Suite 600
 Lawrenceville, GA 30046
 Phone: 770.963.5132
 Fax: 770.339.4282

Newton Environmental Health
 1113 Usher Street Suite 303
 Covington, GA 30014
 Phone: 770.784.2121
 Fax: 770.784.2129

Rockdale Environmental Health
 1329 Portman Drive Suite F
 Conyers, GA 30094
 Phone: 770.278.7340
 Fax: 770.278.89

www.gnrhealth.com

FOOD SERVICE PERMIT APPLICATION

Application Date: _____ Is This Facility In a Food Court or Mall? YES NO

FOOD SERVICE TYPE Permanent Mobile Mobile Base of Operation School Catering Institutional

NUMBER OF SEATS Smoke Free All Smoking* Designated Smoking*

*Refer to the Georgia Smoke free Air Act for appropriate selection. An applicable sign, referencing O.C.G.A. § 31-12A-1 et seq. must be posted at the facility. Designated smoking requires additional approval from Gwinnett County Planning & Development. Approval application will be given to applicant, upon request.

FOOD SERVICE FACILITY PHYSICAL LOCATION

Facility Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone () _____ Fax () _____

OWNER INFORMATION

VERY IMPORTANT: MUST BE EITHER A VALID CORPORATION WHICH IS REGISTERED WITH THE SECRETARY OF STATE OR OWNER'S PERSONAL NAME. THIS INFORMATION CANNOT BE CHANGED ONCE THE FACILITY IS PERMITTED. IF CHANGED AFTER PERMITTING, IT WILL BE CONSIDERED A CHANGE OF OWNERSHIP AND ALL PLAN REVIEW AND PERMITTING FEES WILL APPLY.

Corporation Name or LLC (if applicable) _____
 Owner's Personal Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone () _____ Work () _____ FAX () _____ Other () _____
 E-mail _____

BILLING INFORMATION (Please note, this is the address where all bills and permits will be mailed.)

Facility Name _____ Attention: _____
 Address _____
 City _____ State _____ Zip _____
 E-mail _____

**ANY CHANGE TO OWNER NAME CONSTITUTES A CHANGE IN OWNERSHIP.
 ANY CHANGE IN OWNER/OWNERSHIP WILL REQUIRE A NEW, APPLICATION, PLAN REVIEW AND PERMITTING FEE.
 PERMITS ARE NOT TRANSFERABLE FROM OWNER TO OWNER OR LOCATION TO LOCATION.
 CONTINUED OPERATION WITHOUT A VALID PERMIT IS A VIOLATION OF FOOD SERVICE REGULATIONS AND MAY RESULT IN LEGAL ACTION**

AUTHORIZED OWNER/AGENT INFORMATION

Print Name: _____ Phone Number: _____
 Sign Name: _____

Applicant's affiliation with facility (check one): Owner Contractor Architect Expeditor Other _____

Office Use Only: COO NEW PPF COOC Inspector Area _____ Property Tax ID _____
 PR1 PR2 PR3 PR4 Risk Type _____ Desk Duty Initials _____

FOOD SERVICE PLAN REVIEW REQUIREMENTS

APPLICATIONS WILL **NOT** BE ACCEPTED WITHOUT **ALL** OF THE FOLLOWING ITEMS.

Front Page of the Food Service Permit Application (Page 1) and notarized Public Benefits Affidavit (9-10-14)

- FULLY COMPLETED
- SIGNED (both the Application and Public Benefits Affidavit must be signed by the same person)
- DATED **Please do NOT date the application, until the day, it is accepted by Gwinnett County Environmental Health (GCEH)**.

Completed application packet

ALL PAGES MUST BE COMPLETED BY THE APPLICANT. Please fill out all pages to the best of your ability. Assistance will be provided when meeting with an application intake inspector in Gwinnett County, however, if **ALL** documentation and information is **NOT** provided, your application will be **DENIED**. You will be asked to return, when you have all **REQUIRED** information needed to process your application. If assistance is needed in Newton or Rockdale County an appointment must be made with an inspector.

Answers to the following questions:

- Please list the contact information for the plan review comments and to schedule your opening inspection.

Name _____ Title _____
(ex: Owner/Manager/Contactor, etc.)

Phone Number _____ Email _____

- Please list the days and times you are open to the public.
(ex: Monday 11 am – 10 pm Saturday 11 am – 11 pm Sunday CLOSED)

Monday _____	Thursday _____	
Tuesday _____	Friday _____	
Wednesday _____	Saturday _____	Sunday _____

- Please list the days and times, outside of the time you are open to the public, that you are conducting food preparation.
(ex: Open at 11 am for lunch, staff arrives at 8 am for food prep)

Monday _____	Thursday _____	
Tuesday _____	Friday _____	
Wednesday _____	Saturday _____	Sunday _____

- Is your facility on **public sewer** or serviced by a **septic tank**? If unsure contact the local water authority. If your facility is serviced by a septic tank, an Onsite Sewage Management System (OSSMS) review will be required before your food service application will be accepted.

Public Sewer or Septic Tank

Floor Plan

Scaled drawings Scaled drawings are only required for NEW construction or remodels requiring a building permit from the Local Planning and Development Office.

OR

Hand drawn floor plan Hand drawn floor plans are requested for change of ownerships, to ensure a smooth and expedient plan review process. Failure to provide a floor plan may significantly slow down the plan review process, and will not give us an accurate indication of the layout of your facility.

Grease Trap Approval (ONE OF THE FOLLOWING OPTIONS IS REQUIRED):

Gwinnett County

- "Green Sheet" from Gwinnett County P&D
- Variance Form (applied or approved form) from Gwinnett County P&D; signed & approved form will be required prior to the opening inspection
- Red Stamp (on scaled drawings) from Gwinnett County P&D
- City Letter regarding grease trap approval (must be on City letterhead and signed and dated)
- Grease Trap drawn on plumbing page (on scaled drawings) pending Gwinnett County P&D red stamp approval
- If on septic approval from Gwinnett Environmental Health

***IMPORTANT:** Green sheets, variance forms and red stamps are approved by Gwinnett County Department of Water Resources via the Gwinnett County Department of Planning and Development – Stormwater/Water/Sewer Plan Review Section.

***YOU WILL NEED TO OBTAIN THE ABOVE REQUIRED PAPERWORK AT THE FOLLOWING OFFICE:**

Gwinnett County Department of Planning and Development - Stormwater/Water/Sewer Plan Review Section

One Justice Square

446 West Crogan Street

Suite 150

Lawrenceville, GA 30046

678.518.6000 (office)

678.518.6240 (fax)

Website for Gwinnett Planning and Development - Plan Review Section: <http://tinyurl.com/njzhry8>

Newton County

If on sewer approval from :

Newton County Water & Sewage Authority

11325 Brown Bridge Road, Covington, Georgia 30014

770.787.1375 (office)

Website for Newton County Water & Sewage Authority: <http://ncwsa.us/>

If on septic approval from Newton Environmental Health

Rockdale County

If on sewer approval from Rockdale County Water Resources

958 Milstead Avenue

Conyers, GA 30012

770.278.7450 (office)

770.918.6514 (fax)

If on septic approval from Rockdale Environmental Health

Menu

Will you offer customers any food that may be ordered undercooked or raw such as hamburgers, steak, eggs, ceviche, sushi, etc.?

YES OR NO

Please list the food items that may be offered undercooked or raw on your menu. _____

If undercooked or raw foods are offered to customers, at any time, a CONSUMER ADVISORY is required on the menu.

ALL MENUS that contain raw or undercooked foods must have a CONSUMER ADVISORY that contains the DISCLOSURE and REMINDER statement.

Menu items that require the consumer advisory must be marked with an asterisk*.

Hot Water Heater Manufacturer's Specification (Spec.) Sheet, documenting the recovery rate at 100 ° F rise for Tank Models

OR

Documentation Provided for Tankless Hot Water Heater, if applicable

(PLEASE PROVIDE ONE OF THE FOLLOWING)

Manufacturer's Spec. Sheets for ALL Faucets **AND** Hot Water Heater, listed in GPM

Hot Water Heater Manufacturer's Sizing Calculator Form printed from Manufacturer's Website listing all sinks and dishwasher/glass washer used, if applicable.

Letter from Licensed Plumber, Engineer or Architect, listing GPM for ALL Faucets AND Manufacturer's Spec. Sheet for hot water heater (EXISTING FACILITIES ONLY)

Commercial Dishwasher and/or Glass Washer Manufacturer Specification Sheets, **if applicable**

Note: Spec sheet MUST document the gallons per hour (GPH) water usage or provide the gallons per tray (cycle) and number of trays per hour, so that the GPH can be calculated.

New Equipment Specification Sheets, **if applicable**

Note: Spec. sheets NOT required for existing equipment; MUST be provided for any NEW equipment that is installed or added.

Pets in outside dining procedures, **if applicable**

Key Drop Delivery procedures, **if applicable**

Vomiting/Diarrheal Clean-Up Plan

Variance/HACCP plan/procedures, **if applicable**

Applicable Fees Paid

PLAN REVIEW
(MUST be paid at time of application)

ANNUAL
(MUST be paid at time of application; except for NEW construction only,
which may be paid prior to the opening inspection)

Finish Schedule

The following chart is a list of acceptable finishes for floors, walls, ceilings, by area. Please identify the proposed finish in each area by circling the finish for the following areas. Please check the cove box to signify that you will install cove molding in the following areas.

Area	Floor	Wall	Ceiling	Cove base
Cooking (Areas exposed to high heat)	<ul style="list-style-type: none"> • Quarry Tile • Poured Epoxy • Commercial Grade Vinyl Composition Tile (VCT) • Commercial Grade Sheet Linoleum with Chemically Welded Seams 	<ul style="list-style-type: none"> • Stainless Steel • Aluminum • Ceramic Tile 	<ul style="list-style-type: none"> • Stainless • Smooth, Non-Acoustical Plastic Coated or Metal-Clad Fiberboard • Dry-wall Sealed with an Epoxy Finish • Plastic Laminate • Glazed Surfaces 	<input type="checkbox"/>
Food Preparation (No or low heat exposure)	<ul style="list-style-type: none"> • Quarry Tile • Poured Epoxy • Commercial Grade Vinyl Composition Tile (VCT) • Commercial Grade Sheet Linoleum with Chemically Welded Seams 	<ul style="list-style-type: none"> • Stainless Steel • Fiberglass Reinforced Polyester Panels (FRP) • Concrete Block filled with Epoxy Paint or Glaze • Ceramic Tile 	<ul style="list-style-type: none"> • Smooth, Plastic Coated or Metal-Clad Fiberboard • Dry-wall sealed with an Epoxy Finish • Glazed surfaces • Plastic laminate 	<input type="checkbox"/>
Warewashing	<ul style="list-style-type: none"> • Quarry Tile • Poured Epoxy • Commercial Grade Vinyl Composition Tile (VCT) • Commercial Grade Sheet Linoleum with Chemically Welded Seams 	<ul style="list-style-type: none"> • Stainless Steel • Fiberglass Reinforced Polyester Panels (FRP) • Concrete Block filled with Epoxy Paint or Glaze • Ceramic Tile 	<ul style="list-style-type: none"> • Smooth, Plastic Coated or Metal-Clad Fiberboard • Dry-wall sealed with an Epoxy Finish • Glazed surfaces • Plastic laminate 	<input type="checkbox"/>
Food Storage	<ul style="list-style-type: none"> • Quarry Tile • Poured Epoxy • Commercial Grade Vinyl Composition Tile (VCT) • Commercial Grade Sheet Linoleum with Chemically Welded Seams 	<ul style="list-style-type: none"> • Stainless Steel • Fiberglass Reinforced Polyester Panels (FRP) • Concrete Block filled with Epoxy Paint or Glaze • Ceramic Tile • Epoxy Sealed Dry-Wall 	<ul style="list-style-type: none"> • Plastic Coated or Metal-Clad Fiberboard • Dry-wall sealed with an Epoxy Finish • Glazed surfaces • Plastic laminate 	<input type="checkbox"/>

Area	Floor	Wall	Ceiling	Cove base
Bar (Food Worker Side of Bar or Serving Area)	<ul style="list-style-type: none"> • Quarry Tile • Poured Seamless Plastic Polymer • VCT Quarry Tile • Poured Epoxy • Commercial Grade Vinyl Composition Tile (VCT) • Commercial Grade Sheet Linoleum with Chemically Welded Seams 	<ul style="list-style-type: none"> • Stainless Steel • Fiberglass Reinforced Polyester Panels (FRP) • Concrete Block filled with Epoxy Paint or Glaze • Ceramic Tile 	<ul style="list-style-type: none"> • Plastic Coated or Metal-Clad Fiberboard • Dry-wall sealed with an Epoxy Finish • Glazed surfaces • Plastic laminate 	□
Restroom	<ul style="list-style-type: none"> • Quarry Tile • Poured Epoxy • Commercial Grade Vinyl Composition Tile (VCT) • Commercial Grade Sheet Linoleum with Chemically Welded Seams 	<ul style="list-style-type: none"> • Stainless Steel • Fiberglass Reinforced Polyester Panels (FRP) • Concrete Block filled with Epoxy Paint or Glaze • Ceramic Tile 	<ul style="list-style-type: none"> • Plastic Coated or Metal-Clad Fiberboard • Dry-wall sealed with an Epoxy Finish • Glazed surfaces • Plastic laminate 	□
Mop Service Areas	<ul style="list-style-type: none"> • Quarry Tile • Poured Epoxy • Commercial Grade Vinyl Composition Tile (VCT) • Commercial Grade Sheet Linoleum with Chemically Welded Seams 	<ul style="list-style-type: none"> • Stainless Steel • Fiberglass Reinforced Polyester Panels (FRP) • Concrete Block filled with Epoxy Paint or Glaze • Ceramic Tile 	<ul style="list-style-type: none"> • Plastic Coated or Metal-Clad Fiberboard • Dry-wall sealed with an Epoxy Finish • Glazed surfaces • Plastic laminate 	□
Walk-Ins Freezer & Cooler	<ul style="list-style-type: none"> • Quarry Tile • Poured Epoxy • Insulated Metal Flooring provided by the Manufacturer of the Walk-In 	<ul style="list-style-type: none"> • Fiberglass Reinforced Polyester Panels (FRP) • Aluminum • Insulated Metal Walls provided by the Manufacturer of the Walk-In 	<ul style="list-style-type: none"> • Insulated ceiling panels provided by the Manufacturer of the Walk-In • Stainless Steel • Aluminum • Fiberglass Reinforced Polyester Panels (FRP) 	□

Tank Water Heater Sizing

Equipment Types	Number of Sinks	GPH* Per sink	Total GPH Per Sink Type
Three-compartment utensil wash sink **		79	
Four-compartment utensil wash sink **		105	
Three-compartment utensil wash sink (single service only)**		63	
Four-compartment utensil wash sink (single service only)**		84	
Three-compartment bar sink **		15	
Four-compartment bar sink**		20	
Food Preparation Sink 1-Compartment		5	
Food Preparation Sink 2-Compartment		10	
Mop sink		10	
Service sink		10	
Pre-flush/rinse basin for a dish machine		45	
Hand washing sink		5	
Clothes Washer		15	
Dish machine* Manufacturer _____ Model _____			
Glass washer* Manufacturer _____ Model _____			
Other:			
TOTAL GPH DEMAND AT 100 ° F RISE			

*Gallons per hour (GPH) water usage from manufacturer's specification sheet.

** GPH based on most common sink size. GPH may be adjusted based on the size of the sink. Compartment wash sink must be sized so that the largest utensil is accommodated for proper dishwashing procedure.

Water Heater Information

Manufacturer	Model Number	Number	BTU or KW	Recovery Rate GPH at 100° F Rise

Hot Water Heater Sizing Calculations If Recovery Rate is unknown

If proposing to use a gas hot water heater uses this:

Total Number of gallons from above _____

Multiple by 83.3 _____

Divide by 76 _____

_____ Number of BTU's in 1000's needed

If proposing to use an electric hot water heater uses this:

Total Number of gallons from above _____

Multiple by 833 _____

Divide by 3413 _____

_____ Number of KW's needed

Tankless Water Heater Sizing (If Applicable)

Tankless water heaters are sized with one of the three following methods:

1. The applicant submits a manufacturer's specification sheet showing the flow rate in gallons per minute (gpm) at 100° F rise AND manufacturer's specification sheets for each faucet/inlet documenting the maximum flow rate in gpm. Also, the applicant COMPLETES this table:

Faucet/Inlet Types	Number of this Faucets	GPM Per sink	Total GPM Per Sink Type
Three-compartment utensil wash sink			
Four-compartment utensil wash sink			
Three-compartment utensil wash sink (single service only)			
Four-compartment utensil wash sink (single service only)			
Food Preparation Sink 1-Compartment			
Three-compartment bar sink			
Four-compartment bar sink			
Food Preparation Sink 2-Compartment			
Mop sink			
Service sink			
Pre-flush/rinse basin for a dish machine			
Hand washing sink			
Clothes Washer			
Dish machine Manufacturer _____ Model _____			
Glass washer Manufacturer _____ Model _____			
Other:			
TOTAL GPM DEMAND AT 100 DEGREES F RISE			

Water Heater Information

Manufacturer	Model Number	Number	BTU or KW	Recovery Rate GPH at 100° F Rise

2. The applicant, in ADVANCE, uses an on-line calculator at the website of the tankless manufacturer's website. Also, the applicant will print Manufacturer Sizing Form generated, from using this calculator, and attach it to this application.
3. The applicant provides a letter from Licensed Plumber, Engineer or Architect listing GPM for ALL Faucets. **For existing facilities only!**

****ATTENTION****

**THE REMAINING PAGES OF THIS PACKET ARE FOR YOU TO KEEP.
PLEASE DO NOT TURN IN THESE PAGES WITH YOUR APPLICATION.
THESE PAGES ARE FOR YOUR REFERENCE AND TO PREPARE YOU FOR YOUR
OPENING INSPECTION.**

**RE-INSPECTIONS AND
REQUIRED ADDITIONAL ROUTINES**

A yearly food service inspection fee is collected and provides for the routine inspections as required by the Food Code. If an inspection score requires, a re-inspection, an informal re-inspection, or a required additional routine inspection, additional fees will be charged for these inspections. **It is the responsibility of the food service permit holder to pay applicable fees.** Below is a breakdown of these additional inspections:

Follow up Inspection (Results in a new score):

A fee will be charged for this inspection.

- A follow up inspection will be conducted when an establishment earns a “C” or “U” on any inspection.
- A follow up inspection will be conducted when a food service permit is suspended (regardless of inspection grade).

Informal Follow up Inspection (Does not result in a new score):

A fee will be charged for this inspection.

- An informal follow up inspection will be conducted when an establishment has earned an “A” or “B” on an inspection and violations were not corrected on site. This inspection will be to confirm corrections of violations cited on the inspection report. An inspection report addendum will be completed and filed in our office. The establishment will keep the score earned on the previous inspection.

Required Additional Routine Inspections (Results in a new score):

A fee will be charged for this inspection.

- Establishments that earn a “C” or “U” grade on any routine inspection (or required additional routine inspection) will have **at least one** additional routine inspection added over the next 12 months.

If a food service permit is suspended, payment must be made at time of compliance conference and prior to reopening. If a follow-up inspection is completed, and the permit has not been suspended, a bill will be forwarded to the food service establishment for prompt payment.

Plan Review Process

1. A plan reviewer will be assigned to your application. Your application will receive a complete plan review.
2. Please allow 8-10 business days for your plan review to be completed. You will be notified if your plan review is completed sooner. While some plan reviews will require less than 8-10 days to complete, in the event that your plan review does require 10 days to process, we ask that you please plan accordingly.
3. Your plan reviewer will contact you via the phone and/or email address as indicated on page 2 of your application. Depending upon the status of your application, your plan reviewer will contact you to either schedule your opening inspection, let you know that some adjustments / corrections need to be made to your plans, or if additional information is needed to complete your review.
4. Once your plan review has been completed and ALL REQUIRED information / adjustments / corrections have been made, your plan reviewer will contact you to either schedule your opening inspection (usually for change of ownerships or facilities not requiring a building permit for any work inside the facility) or to schedule a time to stamp all sets of plans required for any other agencies (usually for new construction or situations where a building permit is required for any work inside the facility).
5. At this point, your plan reviewer will guide you through the rest of the permitting process. They will work with you to schedule the opening inspection at a time that is convenient for you.
6. All non-operating facilities **MUST** score a **100 (A)** on their opening inspection. If the opening inspection is passed with a 100(A), then an opening inspection report will be given to the facility and they will be allowed to open and operate. If the opening inspection is not passed with a **100 (A)**, those violations that cannot be corrected while the inspector is on-site, will be marked as a violation on the inspection report. The report will be coded as a pre-opening inspection. You should notify your plan reviewer when you have made all necessary corrections and are ready for the final opening inspection. The plan reviewer will schedule a date and time to return and conduct the final opening inspection.

7. Open and operating facilities (going through a change of ownership) must score a “C” or better (and have no imminent health hazards) on their initial opening inspection. The facility will be allowed to continue operating during the short time frame allotted for correcting all violations. Inspector will return for the final opening inspection and all violations must have been corrected within the time frame allotted. If all violations are not corrected, the facility must close until the corrections are completed.
8. If more than one pre-opening and one opening inspection (more than 2 visits from the plan reviewer) are required for a facility to be permitted, an additional fee will be charged for any subsequent visits.
9. Once the opening inspection is successfully passed, the plan reviewer will notify the appropriate Business License office and Planning & Development Department that the facility has met all the Health Department requirements.

How to prepare for your OPENING INSPECTION

Please be advised this is not a comprehensive list, your inspector may inform you of additional requirements, at the time of inspection.

- Set aside an adequate area for food containers that are delivered as bent/broken/dented (example: dented cans). Label the area, as such. These foods are not to be used for public consumption. They must be discarded or returned.
- Designate an area for employees to store their personal belongings that is away from food, equipment, single-service items, etc
- Obtain NSF or equivalent, approved food-safe containers with tight-fitting lids for storage in all coolers and dry storage areas.
- Make sure ALL food and single-service items (to-go containers, disposable cups, plates, napkins, etc.) are stored at least 6- inches off the floor.
- Make sure that all gaskets on refrigerators and freezers are clean, attached securely to the frame of the doors, and in good repair.
- Place hanging thermometers in ALL refrigeration equipment and applicable hot holding units.
- Have all refrigeration units turned on and ensure they are at 41° F or below.
- Have all freezer units turned on and ensure they are at 32° F or below.
- Stoves, ovens, steam tables, etc are not required to be turned on for the opening inspection, but must be able to be turned on and operate properly, if asked by your inspector.
- Choose a chemical sanitizer (chlorine or quaternary ammonium / quat) for the manual dishwashing procedure, the dish machine, and all wiping cloth buckets.
- Provide Correct Test strips for checking chemical sanitization in dish machines, manual dishwashing procedure, and cloth sanitization buckets (usually white for chlorine and orange for quat).
- Have a thermometer, on site, which is capable of measuring the temperature of thin pieces of food such as a digital thermometer.
- Provide drain stoppers for all compartments of the manual dish sink.
- All shelving must be clean and at least 6 inches above the floor for all food and clean dish storage.

- Confirm that the following types of equipment (if applicable) are installed with approved indirect connections (air gaps) to sewage/floor drains:
 - All food prep sinks
 - Three or four compartment dish sink
 - Ice machine
 - Dish washing machine
- Replace any missing floor/ceiling tiles and cove base.
- Thoroughly clean all floors, walls, and ceilings.
- Is the ware washing sink (3 or 4 compartment sink) large enough to submerge the largest food contact utensil?
- Are drain boards large enough to separately accommodate all soiled and cleaned items that may accumulate during hours of operations?
- Provide NSF-approved scoops with handles for all dry products and ice.
- Provide paper towels and soap, at all hand sinks, including the restrooms.
- Provide a covered waste receptacle for the female restrooms. If only one unisex restroom is provided, a covered waste receptacle is required.
- All entrances/exits and restrooms must have adequate self-closing doors.
- Provide a hand wash reminder or instruction sign at all hand wash sinks. You may obtain a hand wash sign on our website. www.gnrhealth.com
- Make sure that lights are shielded or shatterproof.
- Provide an adequate area for chemical storage.
- Eliminate all exposed wood in the facility. If wood cannot be eliminated, cover with a epoxy paint of white/light-colored finish.
- Eliminate all residential-grade equipment in the prep areas and, if necessary, replace with commercial-grade equipment.
- Thoroughly clean the interiors and exteriors of all equipment.
- Make sure the facility's dumpster is installed with an adequate drain plug and tight-fitting lids/doors.

- Ensure Refrigeration Units:**
 - Are ANSI or equivalent.
 - Are in good repair and calibration.
 - Have doors and hinges that are in good repair and are tight-fitting to the frame.
 - Have gaskets that are in good repair and free of contaminants.
 - All cooler units maintain temperatures at or below 41 F.
 - All freezer units maintain temperatures that keep the frozen foods solidly frozen.
 - Have adequate and approved storage shelving.
 - Have approved cove basing around the interior and exterior of walk-in units.

- Ensure Food-Contact Items and Linens are stored on clean, dry surfaces and are NOT stored in the following locations:**
 - Locker rooms/employee break rooms
 - Restroom facilities
 - Mechanical rooms
 - Under sewer lines
 - Under open stairwells

- Ensure Food-Contact Items and Linens are:**
 - Stored in a self-draining position that allows for air-drying
 - Kept in original protective packaging that affords protection from contamination until used

- Ensure Food-Contact Items and Linens are NOT exposed to:**
 - Splash
 - Dust
 - Other possible sources of contamination

- Ensure Self-service counter areas, buffet lines, and/or food bars have adequate and approved shielding.

- Ensure that there is adequate space for separation of raw animal foods during storage, preparation, holding, and display from all ready-to-eat foods.

- Ensure that all unwashed fruits and vegetables are stored below all washed fruits and vegetables and ready to eat foods.

- Ensure notice is posted in a prominent place in the self-service area that customers must use clean tableware each time they visit the self service area.

- Designate an area where the most current inspection report shall be prominently displayed in public view at all times, within fifteen feet (15') of the front or primary public door and between five feet (5') and seven feet (7') from the floor and in an area where it can be read at a distance of one foot (1') away.

- If applicable, ensure all drive-thru windows have the most current inspection report posted, so that a minimum of the top one-third of a copy of the current inspection report is visible through each window allowing customers to easily read the score, date of inspection and establishment information.

- Provide a choking poster that is displayed in a prominent place in the dining room. You may find a choking poster on our website www.gnrhealth.com
- Have an appropriate Employee Health Policy on-site and be prepared to answer questions regarding this policy with your inspector. If you do not already have an Employee Health Policy, your inspector can provide one for you at the opening inspection, or you can find one on our website www.gnrhealth.com . All food employees and conditional employees must be informed in a verifiable manner of their responsibility to report to the person in charge about their health and activities as they relate to diseases that are transmissible through food. A Conditional Employee or Food Employee Agreement form can be found at the following website http://dph.georgia.gov/sites/dph.georgia.gov/files/related_files/site_page/EnvHealthFoodEmployeeReportingAgreement.pdf
- Register for a Certified Food Safety Manager's Training Course.** At least one Certified Food Safety Manager is required, at each facility, within 60 days of permitting. The ORIGINAL certificate must be posted within public view. Certificate may only be used at ONE location. Copies are NOT allowed. If you do not have the certification already, registration is available at the Gwinnett County Environmental Health Office. Additional classes and classes in other languages may be found at Servsafe, Prometric, Learn2Serve, or National Registry of Food Safety Professionals Accredited Certified Food Safety Manager Courses.
- Person in charge shall have Allergy Awareness Training as it relates to their assigned duties. Be aware of the eight major food allergens and food allergy symptoms.
- Ensure the hot water at all of the hand sinks reaches at least 100F.