



Morrison County will provide cost effective, high quality services
to county residents in a friendly and respectful manner.

Food Establishment Plan Review Application

Morrison County Health and Human Services – Environmental
Health 213 First Avenue SE
Little Falls, MN 56345
Office Phone: 320.632.7800 or Fax: 320.632.0372
Email: phenvhealth@co.morrison.mn.us

Plans must be submitted and approved before construction begins. Allow at least 30 days at a minimum for plan approval.

ESTABLISHMENT INFORMATION:			
Establishment Name:			
Establishment Address:			
City:	State:		Zip:
County:		Business Phone:	
Check all that apply: <input type="checkbox"/> Private Water <input type="checkbox"/> Municipal Water <input type="checkbox"/> Private Sewer <input type="checkbox"/> Municipal Sewer		Seating Capacity: (check one) <input type="checkbox"/> 50 or less <input type="checkbox"/> More than 175 <input type="checkbox"/> 50 - 175	

SUBMITTER INFORMATION:		
Submitter Name:		
Submitter Address:		
City:	State:	Zip:
Contact Phone:	Cell Phone:	
Email:		

CONTRACTOR/ARCHITECT/ENGINEER INFORMATION: (If different from submitter)		
Name and/or Company:		
Mailing Address:		
City:	State:	Zip:
Contact Phone:	Cell Phone:	
Email:		

OWNER INFORMATION: (If different from submitter)		
Owner Name:		
Mailing Address:		
City:	State:	Zip:
Contact Phone:	Cell Phone:	
Email:		
Proposed date for Start of construction:	Proposed date for Completion of construction:	

FOOD, BEVERAGE AND LODGING ESTABLISHMENT DEFINITIONS (Minnesota Statute 157.16)

Limited Food Menu Category (provides one or more of the following):

- * prepackaged food that receives heat treatment and is served in the package;
- * frozen pizza that is heated and served;
- * a continental breakfast such as rolls, coffee, juice, milk, and cold cereal;
- * soft drinks, coffee, or nonalcoholic beverages; or
- * cleaning of eating, drinking, or cooking utensils, when the food is prepared off site.

Lodging Per Unit - the number of guest rooms, cottages, or other rental units of a hotel, motel, lodging establishment, or resort, or the number of beds in a dormitory.

Youth Camp - a parcel or parcels of land with permanent buildings, tents or other structures together with appurtenances thereon, established or maintained as living quarters where both food and beverage service and lodging or the facilities therefore are provided for ten or more people, operated continuously for a period of five days or more each year for educational, recreational or vacation purposes, and the use of the camp is offered to minors free of charge or for payment of a fee.

Plan Review Fee Schedule for **New Construction**

<input type="checkbox"/>	Food and/or Beverage Service.....	\$385.00
<input type="checkbox"/>	Food & Beverage Establishment with Limited Food Menu.....	\$245.00
	Mobile Home Park (2 or more units).....	\$385.00
<input type="checkbox"/>	Recreational Camping Area (5 or more units).....	\$385.00
	Youth Camp.....	\$385.00
<input type="checkbox"/>	Seasonal Permanent Food Stand.....	\$245.00
<input type="checkbox"/>	Mobile Food Unit.....	\$245.00

Plan Review Fee Schedule for **Remodel**

<input type="checkbox"/>	Existing Food & Beverage.....	\$245.00
	Hotel/Motel, Recreational Camping Areas, Mobile Home Parks	\$245.00
	Other	\$245.00

FOR OFFICE USE ONLY:

Date Received:

Check #:

Fee:

Please make checks payable to: Morrison County HHS

ROOM FINISH SCHEDULE

Room	Floor Material	Base Coving Material	Wall Finish	Ceiling Finish
Example	QT	QT	FRP	PT
Food Prep Area				
Cooking Area				
Dish Wash Area				
Mop Sink Area				
Toilet Rooms				
Garbage Storage				
Buffet Area				
Wait Station				
Bar Service				
Dry Storage Room				
(Other)				
(Other)				

Refer to page 19 of the Food Service Construction Guide for approved finishes.

Please use the following abbreviations when filling out the chart:

FRP – Fiberglass Reinforced Panel

CT – Ceramic Tile

PT – Semi-Gloss Paint

GYP – Gypsum Board

VCT – Vinyl Composition Tile

QT – Quarry Tile

SS – Stainless Steel

What will the wall finish be behind the cooking equipment?

- ☐ Insulated Stainless Steel Panels
- ☐ Ceramic Tile

Floor and base finish inside of the walk-in refrigeration/freezer if installing:

Walk-in Cooler Floor _____ Base Coving _____

Walk-in Freezer Floor _____ Base Coving _____

Walk-in Keg Cooler Floor _____ Base Coving _____

Commercial water heater model and size (gal.): Model _____ Size _____
(location of water heater must be on the layout.)

What will the counter top finishes be? _____

What type of finish on the cabinetry? _____

EQUIPMENT SCHEDULE FORM

[illegible]

New Equipment: Submit manufacturer specifications sheet for each piece of new equipment.

Used or existing equipment will be field approved prior to installation by Morrison County HHS.

Proposed Menu Items

[illegible]

Submit a copy of your establishment menu when available.

Documents Required For Applying

- ☐ All pages of this application
- ☐ Payment for plan review fees made payable to: Morrison County HHS
- ☐ Easily readable layout including;
 - location of equipment
 - hand sinks, food prep sinks
 - dish washing equipment
 - storage areas (dry food)
 - wait stations
 - bars
 - janitor areas (mop sink)
 - 3 compartment sink with drainboards
 - ice machine & floor drain
 - indirect drains
 - employee lockers/personal storage
 - refrigeration/freezer equipment
 - walk-in units
 - garbage storage area
- ☐ Intended menu
- ☐ Manufacturers' specification sheets for each piece of new equipment
- ☐ Set of elevations and drawings for all custom fabricated equipment
- ☐ Sleeping room dimensions for lodging establishments

**The plan review fee is a separate fee from the license fee. After your plan review application has been reviewed and approved, you will receive a food license application. Submit the food application and fee to Morrison County HHS to receive your establishment license.*

Variance Request

- You may apply for a variance (exception) from some parts of Minnesota Rule 4626.

Address For Mailing

Morrison County Health and Human Services
213 First Avenue SE
Little Falls, MN 56345

For Help Filling Out This Application Contact:	
Michelle Warnberg, Registered Sanitarian (320) 632-0343	Carmen Genske, Registered Sanitarian (320) 632-0363

Note: To prevent delay of your project, plan to have the plumbing information submitted well in advance of the construction start date. No plan approval by this office can be given until notified by Minnesota Department of Labor & Industry of plumbing plan approval.

Send all plumbing plans to the:

Minnesota Department of Labor & Industry
Construction Codes & Licensing Division
Engineering & Plumbing Unit
443 Lafayette Road North
St. Paul, MN 55155-4343

*Reminder to enclose plumbing plan review fee along with plans.

