

MICROMARKET



Plan Review Application and Guidelines

MICROMARKET PLAN REVIEW GUIDELINES

A micromarket is a retail food establishment that offers prepackaged non-time/temperature controlled for safety food and/or pre-packaged refrigerated or frozen time/temperature controlled for safety food for self-checkout.

Micromarket display may not be more than 250 linear feet.

Refrigerated or frozen time/temperature controlled for safety (TCS) foods must be stored in a specialty equipment with a health lock.

Micromarkets are exempt from the requirement to have a person in charge.

PLAN REVIEW PROCEDURE

1. A detailed set of plans must be submitted to this office for review, along with this packet and all additional required paperwork, prior to construction of the micromarket. Plans must be a minimum of 11x14 inches in size including the layout of the floor plan accurately drawn to a minimum scale of $\frac{1}{4}$ inch == 1 foot.
2. The plans will be reviewed to ensure compliance with all existing rules and regulations. A letter regarding the status of the plans will be sent within thirty (30) days.
3. Contact the City of Middletown Health Department for a pre-license inspection when construction has been completed. Criteria for licensing must include that the micromarket was constructed according to the approved plans and all equipment in the operation is the same as listed on the plans.
4. The operator may obtain license to operate upon successful pre-licensing inspection and completion of the Application for a License to Conduct a Retail Food Establishment and submission of the required fee.
5. Contact our office at 513-425-1818 for additional questions and concerns

MICROMARKET PLAN REVIEW APPLICATION

DATE: _____

MICROMARKET LOCATION INFORMATION

Name of Facility: _____

Address of Facility: _____

APPLICANT/OWNER INFORMATION

Company name/Owner name: _____

Mailing Address: _____

Contact Name: _____

Email: _____ Phone: _____

CONSTRUCTION INFORMATION

Total Square Footage of Micromarket: _____

Proposed Start Date of Project: _____

Projected Date of Completion: _____

MENU ☐ Menu is attached

List of all foods provided: _____

FACILITIES

PLUMBING FIXTURES	
Hand sink	<input type="checkbox"/> YES <input type="checkbox"/> NO
Mop/Utility sink(s)	<input type="checkbox"/> YES <input type="checkbox"/> NO
Coffee/K-cup machine Type of backflow prevention:	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Air gap <input type="checkbox"/> Indirect drain <input type="checkbox"/> ASSE #
Ice machine Type of backflow prevention:	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Air gap <input type="checkbox"/> Indirect drain <input type="checkbox"/> ASSE #
FRESH WATER AND WASTE WATER	
Is the water supply public or private If private, has the water source been approved by the Ohio EPA (Environmental Protection Agency)?	<input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE <input type="checkbox"/> YES <input type="checkbox"/> NO • Must attach a copy of written approval and/or permit
Is the building connected to the municipal sewer? If no, is the building connected to an Ohio EPA approved private treatment system?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO • Must attach a copy of written approval and/or permit
FINISHES	
What materials are the flooring?	
What materials are the walls?	
What materials are the ceiling?	
FOOD	
Name and location of commissary supplying micromarket	
Is the commissary licensed and inspection by the Ohio Department of Agriculture (ODA)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Will the micromarket sell produce with edible peels? Example: apples, peaches, pears If yes, will the produce be prewashed at the commissary and wrapped to prevent contamination?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO

PLAN SUBMISSION CHECKLIST

YOU KEEP THIS PAGE

Provide plans that are a minimum of 11x14 inches in size that includes the micromarket layout, accurately drawn to scale. This is to allow for ease in reading plans. The plans must include the following items. Failure to provide the required information will result in the plans being disapproved.

- ☐ Completed micromarket plan review application
- ☐ Proposed menu or list of foods to be served
- ☐ Micromarket floor plan, drawn to scale (at minimum 11x14”), must include:
 - ☐ Square footage of micromarket
 - ☐ Entrances and exits
 - ☐ Location and layout of all proposed pieces of equipment
 - ☐ Location of mop sink
 - ☐ Any exterior storage areas or locations where food or equipment will be stored
- ☐ Lighting schedule showing the location of all overhead lighting
 - ☐ At least 10 foot candles (110 lux) at a distance of 30 inches above the floor;
 - ☐ At least 20 foot candles (220 lux) inside equipment
 - ☐ All lights must have protective shield
- ☐ Finish schedule of floors, walls and ceiling in all areas
- ☐ Manufacture name, make and model number of all equipment.

FINAL INSPECTION CHECKLIST

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The following must be completed and available for review during the prelicense inspection. Failure to provide required information may result in a delay in opening.

Construction

- ☐ The micromarket is constructed according to the approved plans
- ☐ Final approval received from all applicable City of Middletown departments

Equipment

- ☐ All equipment has been approved by the City of Middletown Health Department
- ☐ All equipment is correctly installed and working properly
- ☐ All refrigeration is holding at 41 °F or below and has a working thermometer
- ☐ Health timer has been tested to ensure automatic locking of refrigeration and freezer
- ☐ Backflow prevention (if required) has been installed and inspected by the City of Middletown Building Department

Administrative

- ☐ Signed application and payment for license fee has been submitted

_____ **Application for a License to Conduct a:** (check only one)

☐ **Food Service Operation**

Instructions:

☐ **Retail Food Establishment**

1. Complete the applicable section. (Make any corrections if necessary.)
2. Sign and date the application
3. Make a check or money order payable to: **City of Middletown**
4. Return check and signed application to:

**City of Middletown Health Department
One Donham Plaza
Middletown, OH 45042**

* There is a mandatory penalty fee of 25% of the renewal fee operating a food service operation or retail food establishment after the deadline (Chapter 3717 of the Ohio Revised Code).

Before license application can be processed the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in no issuing/renewing a license. This action is governed by Ohio Revised Code 3717.

Name of Facility		Name of License Holder	
Address		Email	
City		State	Zip
Phone #	Fax #		Check if applicable <input type="checkbox"/> Catering <input type="checkbox"/> Seasonal
Name of individual certified in food protection (if any) and their certificate number (use back for additional names)			

Mailing Address for annual renewal if different than above:

Name of parent company or owner		Phone #	
Address		Email	
City		State	Zip
I hereby certify that I am the license holder, or the authorized representative, of the food service operation or retail food establishment indicated above:			
Signature			Date

Licensors to complete below:

Category			
License fee	+ Late Fee	+ State Amount	= Total amount due

Application approved for license and certified as required by Chapter 3717 of the Ohio Revised Code.

By	Date	Audit No.	License no.
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As per AGR 1269 (Rev. 5/13) Ohio Department of Agriculture - As per HEA 5319 (Rev. 5/13) Ohio Department of Health