MICROMARKET
PLAN REVIEW
APPLICATION

Facility Layout & Equipment Specifications

Developed by the Food Protection Program at Columbus Public Health

Updated December 2019
LICENSING

All retail food businesses in the City of Columbus and Worthington are required to have a food service operation or retail food establishment license issued by Columbus Public Health (CPH). If you plan to open a retail food facility, contact CPH for any questions you may have in regard to plan approval or licensing. See the CPH guide ‘Starting a Micro Market’ for more detailed information. Go to http://www.publichealth.columbus.gov to access information about the CPH Food Protection Program.

GETTING STARTED

All new retail food businesses must complete the plan review process. Here we will walk you through all of the necessary steps to obtain a food service license from Columbus Public Health.

Step 1: Submit Plans (at least 30 days prior to construction)
Include the following:
- One (1) complete set of drawings of the facility
- Properly completed application (this document)
- Menu or list of food and beverage items to be sold
- Plan review fee

Step 2: Plan Review Process
- Within 30 days after plans and fee are submitted, CPH will review the plans.
- Plans may require additional information or changes – in this case, you will be contacted.

Step 3: Plan Approval Process
- A letter will be sent informing you that the plans have been approved.
- Plan approvals not acted upon expire in one (1) year, unless the facility is under construction.

Step 4: Construction
- Ensure that all contractors and sub-contractors are licensed, if necessary (check with City of Columbus Building Services at 645-7314).
- Ensure that contractors obtain necessary permits through Building Services.
- Contact CPH if you have questions or need a walk through inspection during construction.

Step 5: Inspections
- CPH requires a minimum of 2 business days' notice to schedule an inspection (based on volume, it may take up to a week). Though we will attempt to accommodate your schedule, call early to avoid scheduling conflicts and allow time for re-inspection if necessary. Call 614-645-6191 to schedule the inspection.
- Once the appropriate license fee is paid and the opening inspection is completed by CPH, you will be able to open for business.

*PLEASE KEEP THIS PAGE FOR YOUR REFERENCE*
PLAN REVIEW APPLICATION

Contact Information

Food Facility Name: ________________________________
Address: ________________________________ Phone: ____________
City: ________________________________ State: ______ Zip: ______
Name of Operator (Owner): ________________________________ Phone: ____________
Contact for Plans: ________________________________ Phone: ____________
Business Name: ________________________________ E-mail: ________________________________
Address for approval letter: ________________________________
City: ________________________________ State: ______ Zip: ______

Construction & Opening Information

Parcel Id Number: ________________________________
Estimated Date Construction Will Begin: ________________________________
Estimated Opening Date: ________________________________
Square Feet Devoted to Food: ________________________________

Plan Review Components

The plans submitted to CPH must be legible, in English and include the following information. Lack of complete information may delay plan approval and/or the opening of your business.

Please make sure that the following are included:
☐ Site plan
☐ Proposed Menu or list of food and beverage items (*all facilities must submit)
☐ Facility Floor Plan, drawn to scale
☐ Location of entrances and exits
☐ Equipment list, include make & model numbers. (*Commercial equipment only – NSF, ETL, etc)
☐ Include elevations or indicate installation of equipment (casters, legs, fixed/sealed)
☐ Interior Finish Schedule with materials for floors, walls, ceilings and coving (example included)
☐ Lighting plan

Internal use only:

AR# ________________________________
SR# ________________________________
IN# ________________________________
PE Code ________________________________
Plan Review # ________
Use the following chart to indicate all interior finishes (unless already included in plans).

☐ This information is included in plans submitted.

<table>
<thead>
<tr>
<th>Room Name</th>
<th>Floors</th>
<th>Walls</th>
<th>Ceilings</th>
<th>Coving</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: Kitchen</td>
<td>Quarry tile</td>
<td>FRP</td>
<td>Vinyl acoustical tile</td>
<td>6” quarry tile</td>
</tr>
</tbody>
</table>

All surfaces must be smooth and easily cleanable. Contact CPH if you have questions regarding whether specific surfaces are acceptable for use in a food service operation.
Please make checks payable to the Columbus City Treasurer.

**PLAN REVIEW FEES**

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Micro Market</td>
<td>$210.00</td>
</tr>
<tr>
<td>Expedited Plan Review</td>
<td>$1000.00 + plan review fee</td>
</tr>
</tbody>
</table>

*The plan review fee must be submitted with application.*

**LICENSE FEES**

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Micro Market</td>
<td>$284.00</td>
</tr>
</tbody>
</table>

*The license fee will be collected at the final inspection. Please do not send it to our office.*

**PLAN REVIEW SUBMISSION**

This application is complete and accurate to the best of my knowledge. I understand that incomplete plans may delay the plan approval process. **I am submitting a set of plans, a menu and the appropriate plan approval fee.**

Signature of applicant: ___________________________ Date: _________________

Submit Plans To: Columbus Public Health  
Food Protection – Plan Review  
240 Parsons Avenue  
Columbus, Ohio 43215

Questions? Phone: 614-645-6191  
Fax: 614-645-7155