

# Outdoor Cooking Operations Plan Review Checklist

(Appendix I)

## GENERAL INFORMATION

**Food Establishment Name:**

**Address:**

**City/State/Zip Code:**

**Contact Name:**

**Contact Phone Number:**

**Food Establishment capable of supporting Outdoor Cooking Operation:**

Yes       No. If No why:

**Select Type of Outdoor Cooking Operation:**

- Permanently Installed Outdoor Cooking Operation  
 Portable Outdoor Cooking Equipment

### Permanently Installed Outdoor Cooking Operation

**Plans received, to include a sketch of the layout:**  Yes       No

**Equipment list received:**  Yes       No

**Menu received:**  Yes (attach)       No

### Outdoor Portable Cooking Operation

**Design/type of cooking equipment – meets minimum equipment requirements:**  Yes  No

**Receipt of drawing of the location specific to the permanent food establishment, to include distances to entrances into the kitchen and access to restroom facilities.**  Yes  No

## STRUCTURAL REQUIREMENTS

**Overhead Protection required:**  Yes  No If yes, identify type: \_\_\_\_\_

**Floor surface of proper construction:**  Yes  No If yes, identify type:

POCO: \_\_\_\_\_

POCE:  Asphalt  Concrete  Wood

Other: \_\_\_\_\_

**Walls required:**  Yes  No If yes, identify type: \_\_\_\_\_

POCO: \_\_\_\_\_

POCE:  Screens  Concrete  Wood

Other: \_\_\_\_\_

**Equipment (Identify type of equipment to be used. Equipment specification to be provided.):**

Cooking: \_\_\_\_\_

Cold holding: \_\_\_\_\_

Hot holding: \_\_\_\_\_

Other: \_\_\_\_\_

**Handwashing facilities required at the OCO:**  Yes  No If yes, identify type:

POCO type: \_\_\_\_\_

POCE type: \_\_\_\_\_

Location: \_\_\_\_\_

Distance: \_\_\_\_\_

**Warewashing facility required at the POCO:**  Yes  No

Location: \_\_\_\_\_

If no, all equipment and utensils must be washed/rinsed/sanitized within the permanent food establishment.

**Lighting:**

Sufficient  Yes  No

Shielded (if applicable)  Yes  No

**Garbage disposal:**  Yes  No If yes, identify type:

Type: \_\_\_\_\_

**Toilet facilities:**

Location: \_\_\_\_\_

Distance: \_\_\_\_\_

## FOOD PREPARATION & FOOD STORAGE

TCS foods pre-cooked and pre-cooled for service at permanent food establishment

Yes  No

Cooking and serving areas protected from contamination:  Yes  No

Equipment separated from public by minimum of 4 feet:  Yes  No

Method for preventing access by patrons or public to food preparation areas

Type: \_\_\_\_\_

**Food protection:**

Displayed food properly protected  Yes  No

**Methods used for protection of food:**

Type: \_\_\_\_\_

**Adequate food storage areas:**  Yes  No

**Adequate utensil storage areas:**  Yes  No

**Adequate wiping cloth storage:**  Yes  No

**Application Approved**

Yes      Yes, with conditions\*      No\* See reason

below

**\*Conditions/Reason(s) for Disapproval:**

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Reviewers Name

Date:

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