Food Facility
Plan Check Application

Date: _____

Amount: _____

Check No. _____

Receipt No. _____

Fees

☐ **$1,126** (Facility > 5,000 sq.ft.) ☐ **$750** (Facility < 5,000 sq.ft.) ☐ **$249** (Pre-packaged food- New or remodel)
☐ **$374** (Minor Remodel, i.e. bathroom remodel, change in hood, walk-in addition, wall removal, etc.)

Business

Name: _____

Location Address: _____

_____

Mailing Address: _____

_____

Phone: _____ Email: _____

Owner

Name: _____

Mailing Address: _____

_____

Phone: _____ Email: _____

Plan Preparer

Name: _____

Mailing Address: _____

_____

Phone: _____ Email: _____

Primary Contact: ☐ Owner ☐ Applicant ☐ Plan Preparer ☐ Other (attach contact info)

Infra-structure

Proposed number of customer seats: _____ Square footage of food facility: _____

Located within incorporated town/city ☐ Yes ☐ No

Served by city/public water system? ☐ Yes ☐ No

Served by a city/public sewer system? ☐ Yes ☐ No

Note: Please verify that the zoning and associated requirements, the wastewater disposal system, and the water supply are adequate for the type and size of the food facility proposed.

I certify that the information in this application is complete and accurate and that I have been provided and have reviewed Butte County's ***Food Facility Plan Check Resource Guide***.

_____ _____ _____

Signature Date Printed Name