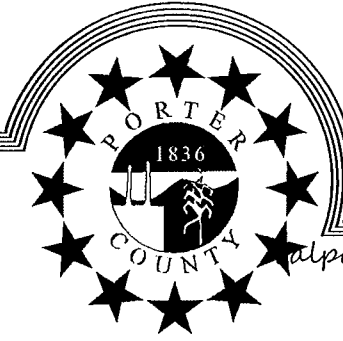


COUNTY - PORTER



Porter County
Health Department
155 Indiana Avenue
Suite 104

Valparaiso, Indiana 46383

(219) 465-3525

Maria Stamp, MD

Health Officer

Application for Retail Food Establishment Construction Plan Review Date: _____

Consistent with 410 IAC 7-24-110:

Food Establishment Information:

Establishment Name: _____ Telephone Number: _____

Establishment Address: _____

Establishment Type: _____

(e.g. restaurant, convenience store, grocery store, bakery)

Total Square Footage: _____

Water Source: (one) _____ Municipal _____ Well Wastewater Disposal: (one) _____ Municipal _____ Private/Onsite

Food Establish Owner Information:

Type of Business/Ownership: (one) Individual Partnership Corporation Members Nonprofit

Corporation/Owner(s) Name: _____

Business Mailing Address: _____ Telephone Number: _____

Owner E-Mail Address: _____

Food Establish Primary Contact Information:

Primary Contact Person: _____ Telephone Number: _____

Mailing Address of Contact Person: _____

Contact Person E-Mail Address: _____

Menu Items: Attach proposed menu with plan review application

Plan Review Fees:

Consistent with Section 8.04.042 of the Porter County Municipal Code:

(a) The Porter County Health Officer, by and through the Porter County Health Department, is hereby authorized to and shall collect a fee for the review of food service establishment site plans as follows:

Limited (Prepackaged food only)	\$50.00
Under 3,000 square feet	\$50.00
3,000 to 10,000 square feet	\$100.00
More than 10,000 square feet	\$200.00

Fees for construction plan review are payable to the Porter County Health Department upon submission of plans.

Porter County Health Department
155 Indiana Ave., Suite 104
Valparaiso, IN 46383
Ph. (219) 465-3525
Fax (219) 465-3531

Office Use Only:

Date Received: _____ Amt. Received: _____

CC/BC _____ Cash _____ Check _____ Check No. _____

Money Order _____ Money Order No. _____

Receipt No. _____ Book No. _____ Initials: _____