



Oklahoma City-County
Health Department
Food Safety & Environmental Health
2400 NW 36th St
Oklahoma City, OK 73112
Telephone: (405) 425-4327
Email: planreview@occhd.org

PLAN REVIEW APPLICATION FOR AN UNATTENDED FOOD ESTABLISHMENT

Name of Establishment: _____

Establishment Address: _____

Name of Owner: _____

Owner's Mailing Address: _____

Owner's Telephone: _____

Owner's Email Address: _____

Applicant's Name: _____

Title (owner, manager, architect, etc.): _____

Applicant's Mailing Address: _____

Applicant's Telephone: _____

Applicant Email Address: _____

Dates: Projected Start Date _____ Projected Completion Date: _____

I hereby certify that the statements in this application are true and correct.

Applicant Signature: _____ **Date:** _____

Printed Name: _____ **Title:** _____

Approval of the plans and specifications by the Health Department does not indicate compliance with any other federal, state or local code, law or regulation that may be required. It further does not constitute endorsement or acceptance of the completed establishment (structure or equipment). An inspection of the establishment will be necessary to determine if it complies with the laws governing food service establishments.