



Montgomery County Department of Health and Human Services
Licensure & Regulatory Services
 2425 Reedie Drive, 9th Floor, Wheaton, Maryland 20902
 Phone: 240-777-3986 / Fax: 240-777-3088 or 240-777-4531
www.montgomerycountymd.gov/licensure

Today's Date:

TO: Applicant/Plan Submitter Name:

SUBJECT: PLAN REVIEW

Building Permit Number:

Have Plans Been Submitted To Permitting Services: **Yes** **No**

Check if Plan has already been submitted to Permitting Services via:

DPS Office or ProjectDox ePlans The City of Rockville The City of Gaithersburg

SCOPE OF WORK:

Food Service Facility	Swimming Pool/Spa Facility	New Construction
Renovation (Previous Facility Closed More Than 6 Months)	Remodel (Current Licensed Facility)	Equipment Replacement (current licensed facility)

To better serve everyone who desires a plan approval, please allow us a **minimum of 14 business days** to conduct a thorough review of Food Facility plans, and a **minimum of 30 business days** for Swimming Pool plans.

Once an initial review has been conducted, you will be contacted regarding the status of the plans. Please do not expect to receive a response prior to 14 or 30 days from the date the plan is received and processed.

Thank you for your patience and cooperation.

PLEASE PRINT

Name of Facility:

ADDRESS OF FACILITY:

Street #: Street Name: Suite #:
 City: State: Zip Code:

Facility Owner's Name:

Facility Owner's Email Address:

Applicant's Name for Correspondence:

APPLICANTS' POSTAL ADDRESS:

Street #: Street Name: Suite #:
 City: State: Zip Code:

Please continue to complete Page 2 of the Plan Review Application

Applicants' Telephone #:

Applicants' Email Address:

Signature of Submitter:

FEES

Type of License	Fee Amount
1. Low Priority (Facilities that serve commercially packaged potentially hazardous foods directly to the consumer; or non-potentially hazardous food that is cut, assembled, or packaged on the premises, such as candy, popcorn, and baked goods; or hand dipped ice cream).	\$240.00
2. Moderate Priority (Facilities that serve potentially hazardous food that is prepared requiring the food to pass through the temperature danger zone, 41°F to 135°F, one time before service, such as cooking, hot holding, and then serving; or facilities that cut, assemble, or package on the premises, such as meats).	\$330.00
3. High Priority (Facilities that serve potentially hazardous food that is prepared a day or more in advance of service; or using food preparation methods that require the food to pass through the temperature danger zone, 41°F to 135°F, two or more times before service, such as cooking, cooling, and then reheating).	\$600.00
4. Food Service Facility - Equipment Replacement.	\$160.00

NOTE: Food Facility Applicants must include Manufacturer Specification sheets for all food-service equipment, which shows proof it has obtained a commercial-grade standard/rating accepted by this Office (such as: NSF, ETL-Intertek, CSA, UL-Listed, UL-Sanitation, BISSC, etc.)

5. Swimming Pool - Plan Review	\$480.00
6. Swimming Pool- Equipment Replacement	\$260.00

NOTE: Swimming Pool Applicants must also apply for a "Hazardous Materials Use Permit". You must contact the Office of Emergency Management at 240-777-2300.

PAYMENT METHOD

Submit completed application and fee to: **Licensure & Regulatory Services**, 2425 Reedie Drive, 9th Floor, Wheaton, Maryland 20902.

Checks/Money Orders payable to "Montgomery County, Maryland" or pay by Mastercard, VISA or checking card.

CASH IS NOT ACCEPTED

SELECT TYPE OF PAYMENT METHOD BELOW

Check Money Order Mastercard VISA

CREDIT CARD PAYMENT SECTION

Credit Cardholder's Name:

Credit Card #:

Exp Date:

3-Digit Security Code:

Amount: \$

I agree to pay the above total amount according to the card issuer agreement:

Cardholder's Signature:

OFFICE USE ONLY

Receipt #:

Date Received:

Amount Paid: \$

Staff Initials:

Check/Money Order #:

Credit Card Approval Code-MC/VISA: