Cleveland Department of Public Health

CITY OF CLEVELAND
DEPARTMENT OF PUBLIC HEALTH
APPLICATION FOR PLAN REVIEW

Revised 03/2019

- ☐ **Commercial Food Service Operation**
- ☐ **Commercial Retail Food Establishment**
- ☐ **Non-Commercial Food Service Operation**
- ☐ **Non-Commercial Retail Food Establishment**

Instructions:

1. **Complete all applicable sections.**
2. **Sign and date the application.**
3. **Division of Environment Personnel will determine your plan review fee.**
4. **Submit application and make payment to: City of Cleveland,Assessments and Licenses, 601 Lakeside Ave., Room 122.***

***NOTE:** Plans will not be reviewed by the Department of Public Health, until payment has been made and confirmation is made via fax or email to the Division of Environment.

DATE		
ARCHITECT/PERSON TO CONTACT	OWNER NAME	CONTACT PHONE AND FAX NUMBER
PROPOSED FACILITY NAME	PROPOSED ADDRESS	ZIP CODE
SQUARE FOOTAGE	NON-PROFIT ORGANIZATION (CIRCLE ONE) YES NO	FEDERAL 501(C)(3) TAX EXEMPTION I.D. NUMBER

ASSESSMENTS AND LICENSES STAMP OF DATE RECEIVED AND PAYMENT

SIGNATURE OF OWNER/ APPLICANT	DATE

ENVIRONMENT USE ONLY

OPERATION TYPE	FEE	APPLICABLE FEE CHECKED
New Operations (Non Commercial)	$200.00	
New Operations (Commercial)	$400.00	
Extensive Alteration (Non Commercial)	$100.00	
Extensive Alteration (Commercial)	$200.00	

Note: If the food shop is pre-existing, you must obtain a permit from the Department of Building and Housing for extensive alterations.

DIVISION OF ENVIRONMENT STAMP

SANITARIAN SIGNATURE	DATE