



APPLICATION FOR HOST FACILITY SITE EVALUATION

Environmental Health Division
 5050 Commerce Drive, Baldwin Park, CA 91706
www.publichealth.lacounty.gov/eh
 (626) 430-5320/ehmail@ph.lacounty.gov



To obtain a Public Health Permit as a Host Facility, a site evaluation is required to ensure that the host facility meets the requirements. Please complete the below and submit by mail to: Environmental Health Division at the above address.

Date of Application:		Legal Name of Business (DBA):		OFFICE USE ONLY SR # _____ Invoice # _____	
ATTACHMENTS	The following documents must be submitted with this application: 1. Site Plan (see description below) 2. Site evaluation fee of \$167 made out to the County of Los Angeles.			Check-off submitted documents: <input type="checkbox"/> <input type="checkbox"/>	
	Host Facility Address		Address:		
		City:		Zip:	
Host Facility Contact Information		Name:			
		Phone:		Email:	
Host Facility Site Plan:		Attach a site plan showing:			
		<ol style="list-style-type: none"> 1. The location of the catering operation within the building/area. 2. The location of the restrooms. 3. The location of the hand washing sink(s). 4. The location of the janitorial sink. 5. The location of any equipment storage. 			
Hand Washing:		Describe the hand washing facilities available within 20 feet of the catering operation:			
Restrooms:		<p>Approved restroom facilities shall be made available to catering and food facility operators. Restrooms shall meet requirements outlined in the California Retail Food Code.</p> <p>Restrooms shall:</p> <ul style="list-style-type: none"> • Be located within 200 feet of food service operation. • Have cleanable floor, wall and ceiling finishes. • Have permanently attached hand soap, paper towel and toilet paper dispensers. • Have warm water between 100°F-108°F at handwashing sinks. 			
Overhead protection:		Describe the overhead protection over the proposed catering operation:			
Flooring:		Describe the flooring material under the proposed catering operation:			
On-site storage:		Indicate if any items (i.e. tables, chafing dishes) to support the catering operation will be stored at the host facility and note the storage location:			

Equipment	List any equipment that will be provided by the host facility to support the catering operation:
Cleaning and Sanitation	<p>Describe procedures, methods, and schedules for cleaning and sanitizing utensils, food contact surfaces, and equipment at the permitted food facility:</p> <p>Indicate the specific sanitizer or sanitizing method that you will use:</p> <p><input type="checkbox"/> Contact with a solution of 100 ppm (parts per million) available chlorine for at least 30 seconds.</p> <p><input type="checkbox"/> Contact with a solution of 200 ppm available quaternary ammonium for at least one minute.</p>
Refuse/Janitorial	<p>Describe methods, and schedules for disposal of refuse:</p> <p>Is there a janitorial sink (also known as “mop sink”) with 120°F hot water available for the catering operation within the building? Yes ___ No___</p> <p>If no, describe the janitorial service used to clean spills promptly and maintain the floors and restrooms clean and stocked:</p>

ACKNOWLEDGMENT	By signing below, I acknowledge that the information contained in this Application and attached documents are true and correct.	
	I understand that the installation of new equipment or any changes to the operation require approval. Contact the Environmental Health Division at (626)430-5320 for additional information.	
	Once the site evaluation fee is paid, a representative from the Environmental Health Division will contact the host facility representative identified in this application to schedule the site evaluation. Once the site meets the requirements, a Public Health Permit/License Application and a Public Health Permit/License - Supplemental Application for a Host Facility will be provided to complete and submit to Environmental Health at the address on the first page of this application.	
	The site evaluation fee is non-refundable.	
	Print Name: _____	
Signature: _____		
Title: _____	Date: _____	