

## Utah Department of Agriculture and Food

## Division of Regulatory Services

4315 South 2700 West TSOB South Bldg., Floor 2 Taylorsville, UT 84129-2128 Phone: (801) 982-2252

Fax: (385) 465-6023 udaf-estabregistration@utah.gov

## Manufactured Food Establishment Plan Review Application

## The applicant must submit a plan review application at least 30 calendar days prior to operation.

\*Note: The Utah Department of Agriculture and Food, Manufactured Food Regulatory Program, regulates products that are prepared and/or wholesaled to separate entities. Retail operations must complete a plan review application as directed by the Retail Food Regulatory Program (*UDAF Form PR101*).

E ( 111 1 ( N	
Establishment Name:	
Corporate Name (Parent Company):	
Establishment Address:	
City:	
Billing Address:	
City:	
Owner Name:	 
Owner Phone:	
Owner Email:	 
Contact Person:	 
Contact Person's Title:	
Contact Phone:	
Contact Email:	
Architect/Designer:	
Phone:	

Date Plans Submitted//	Projected Completion Date//			
Check One: ☐ New Facility ☐ Remodel/Conversion of an Existing Facility  Customer Number of Existing Facility:				
The following information is required to be submitted prior to review. Plans will not be accepted or reviewed until all items are submitted:				
<ul> <li>Product list/categories</li> <li>Anticipated volume of food</li> <li>Proposed layout</li> <li>Mechanical schematics</li> <li>Construction materials</li> <li>Equipment layout and schedules</li> <li>Finish Schedule</li> </ul>				
Fee Schedule: Plan review fees are nonrefundable and are based on the food establishment square footage (inspectable). Plans will not be accepted without payment.	Small: \$150.00 Medium: \$300.00 Large: \$500.00 Super: \$750.00			
Check One:				
☐ Less than 1,000 Square Feet (Small E	Establishment)			
☐ 1,000 – 5,000 Square Feet (Medium Establishment)				
☐ 5,000 – 50,000 Square Feet (Large Establishment)				
☐ Greater than 50,000 Square Feet (Super Establishment)				
For payment please contact the Utah Department of Agriculture and Food, Division of Regulatory Services at 801-982-2252 or by mail (written order check) to 4315 South 2700 West,				

TSOB South Bldg., Floor 2, Taylorsville, UT 84129-2128.

\*Note: Prior to commencing food operations, the owner/operator must apply for a food

\*Note: Prior to commencing food operations, the owner/operator must apply for a food establishment registration and successfully pass a pre-operational inspection. A notice of at least seven calendar days is required for all construction and pre-opening inspections.

	rm registere		d and Drug Administration (FDA) in accordance with the
	] Yes	□ No	
=	r facility medial inspection		d Manufacturing Practice requirements at the time of the pre-
	☐ Yes	□ No	
hold <b>FO</b> (	<b>OD</b> as define	ed in section 20	leted by firms that manufacture, process, package, and/or OI(f) of the Federal Food, Drug, and Cosmetic Act (including ns not engaging in these activities may leave this section
` '	ndicate your ood:	firm's average	annual sales (including subsidiaries and affiliates) of human
[] pı		an \$1,000,000. e-year period.	.00 in annual gross sales (adjusted for inflation) over the
		\$1,000,000.00 e-year period.	in annual gross sales (adjusted for inflation) over the
ar		51,000,000.00,	al sales (including subsidiaries and affiliates) of human food has your firm filed an attestation with the FDA to become a
	Yes	□ No	☐ Not Applicable
uı gı	nexposed parowth and/or	ckaged food (1 toxin production	acility and intending to engage in holding/storage activities of requiring time/temperature control to minimize or prevent ion of pathogens) have you established and implemented the CFR 117.206?
	] Yes	□ No	☐ Not Applicable
<u>ht</u>		da.gov/food/re	o FDA attestation please see the following link: <u>registration-food-facilities-and-other-submissions/qualified-</u>

*Qualified facilities may be subject to modified requirements of 21 CFR Part 117, Subpart D.* (3) If your firm's average annual sales (including subsidiaries and affiliates) of human food are greater than \$1,000,000.00, have you fully written and implemented a food safety plan as required by the FDA Food Safety Modernization Act (FSMA), Preventive Controls for Human Food (PCHF)? ☐ Yes  $\square$  No ☐ Not Applicable Indicate which of the following food safety plan requirements you have prepared and implemented: (Check all that apply)  $\square$  The written hazard analysis as required by 21 CFR 117.130(a)(2). ☐ The written and implemented preventive controls as required by 21 CFR Part 117, Subpart C. ☐ The written supply-chain program as required by 21 CFR Subpart G. ☐ Established and maintained records as required by 21 CFR 117 Subpart F. \*Note: 21 CFR Part 117, Subparts C (Hazard Analysis and Risk-Based Preventive Controls) and G (Supply-Chain Program), does not apply to Fish and Fishery Products (21 CFR Part 123); Juice HACCP (21 CFR Part 120); Low Acid Canned Foods (21 CFR Part 113) in regards to microbiological hazards; Dietary Supplements (21 CFR Part 111); or Covered Produce Farms (21 CFR Part 112). Does your firm manufacture, process, package, and/or hold cannabis or cannabis-derived products, including cannabidiol (CBD)? ☐ Yes  $\square$  No Do you intend for cannabis or cannabis-derived products to enter into interstate commerce (transactions that cross state boundaries)? ☐ Yes  $\square$  No \*Note: The Utah Department of Agriculture and Food incorporates by reference 21 CFR Part 111, Current Good Manufacturing Practice in Manufacturing, Packaging, Labeling, or Holding

\*Note: Full implementation of 21 CFR Part 117, Subparts C (Hazard Analysis and Risk-Based Preventive Controls) and G (Supply-Chain Program) does not apply to a qualified facility.

-	rations for Dietary Supplements for a licens ved products.	ee eng	gaged in processing cannabis or cannabis-
Does	s your firm manufacture, process, package,	and/or	hold kratom or kratom-derived products?
	□ Yes □ No		
	you intend for kratom or kratom-derived prosactions that cross state boundaries)?	ducts	to enter into interstate commerce
	□ Yes □ No		
111, Oper	te: The Utah Department of Agriculture and Current Good Manufacturing Practice in Mations for Dietary Supplements for a licens wed products.	1anufc	acturing, Packaging, Labeling, or Holding
	General Product Categ	ories	/ Type of Activity
Chec	ck each applicable category based on the type	oe of o	peration and food preparation.
	Human Food – 21 CFR Part 117		Low Acid Canned Food – 21 CFR Part 113
	Dietary Supplements – 21 CFR Part 111		Juice – 21 CFR Parts 120 and/or 102 *
	Infant Formula – 21 CFR Part 107		Seafood – 21 CFR Part 123 *
	Acidified Food – 21 CFR Parts 114 and 108		Bottled Water – 21 CFR Part 129
	owner/operator is responsible for ensuring cicable to their operation.	compli	ance with all rules, regulations, and laws
	properly prepared Hazard Analysis and Crit nitted for validation and approval before eng		

Please provide all requested information on the following pages. If a particular line item is not applicable to your food establishment, please indicate with "N/A".
Specifically list the type of product(s) prepared/processed on-site (i.e. bakery products, chocolate/cocoa products, cannabis, kratom, etc.); trade secrets will be treated as confidential by the regulatory authority:
Does your firm intend to prepare/process any meat, poultry, and/or siluriforme products for wholesale?
□ Yes □ No
If yes, specify the total percentage of meat, poultry, and/or siluriforme (raw and/or cooked) in each product intended for wholesale:

Indicate the anticipated daily volume of product prepared/processed and/or stored on-site; if there is more than one preparation and/or storage area, please specify the location and the anticipated volume for each area (i.e. number of commodities or packages, product weight, pallets, etc.):
Indicate the finish schedule materials (i.e. quarry tile, stainless steel, fiberglass reinforced plastic, etc.) used in each area of the food establishment (floors, walls, floor/wall junctures, and ceilings):

Ensure that manufacturer specification sheets are submitted for each piece of equipment used (including custom fabricated equipment), and ensure that all equipment is accounted for in the site plan or proposed layout.
Indicate the proposed equipment used in each area of the food establishment (including the manufacturer, model number, location, dimensions, performance capacities, and installation specifications):
The owner/operator is responsible for submitting Hazard Analysis and Critical Control Point (HACCP) plans for validation and approval before engaging in an activity that requires a management system.
This form and the provisions therein must be submitted to the Support Services Staff at <a href="mailto:udaf-estabregistration@utah.gov">udaf-estabregistration@utah.gov</a> . Submitting this plan review application does not constitute authorization from the Utah Department of Agriculture and Food to operate a food establishment. Plans will not be reviewed until payment is received.
STATEMENT: I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior permission from the Utah Department of Agriculture and Food may delay final approval.
Printed Name: Legal Agent and/or Owner
Signature: Legal Agent and/or Owner
Date: / /

At least one on-site visit throughout the construction process is highly recommended as other requirements may become more apparent. A preopening inspection of the food establishment is required to determine compliance with the Utah Food Protection Rule.

For assistance completing this application, please contact the Utah Department of Agriculture and Food, Division of Regulatory Services at 801-982-2255.