



TENNESSEE DEPARTMENT OF AGRICULTURE  
CONSUMER & INDUSTRY SERVICES  
ATTN: FOOD & DAIRY  
P.O. BOX 40627 Packages to: 436 Hogan Road  
NASHVILLE, TN 37204 NASHVILLE, TN 37220  
PHONE# 615-837-5193; FAX (615) 837-5005;  
NEWFOOD.BUSINESS@TN.GOV

## FOOD RETAIL / PLAN REVIEW QUESTIONNAIRE

Food Retail Plan Review questionnaire is to be completed by the Owner/Operator and submitted to Consumer & Industry Services. Please refer to the Tennessee Retail Food Store Sanitation Regulations 0080-04-09 for the basic requirements.

BUSINESS NAME Include any dba \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ COUNTY \_\_\_\_\_

NAME OF BS OWNER(S) \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

NAME OF CONTACT \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**TYPE OF ESTABLISHMENT:** BAKERY \_\_\_; MEAT \_\_\_; STORE W/DELI \_\_\_; STORE \_\_\_; PRODUCE \_\_\_; OTHER \_\_\_;

**PLEASE CHECK ALL THAT APPLY:** NEW \_\_\_; REMODEL \_\_\_; CONVERSION \_\_\_; OTHER \_\_\_;

(Upload copy of well water or spring approval from local environmental field office or from the TN Dept of Environment & Conservation)

**CHECK ONE:** WELL WATER \_\_\_; CITY WATER \_\_\_; SPRING \_\_\_;

**CHECK ONE:** PUBLIC SEWAGE \_\_\_; SEPTIC TANK \_\_\_; (SUBMIT INSPECTION LETTER - CERTIFICATION - APPROVAL FROM TDEC)

CERTIFICATE OF OCCUPANCY - Yes \_\_\_; No \_\_\_; BUSINESS LICENSE - Yes \_\_\_; No \_\_\_; LEASE AGREEMENT - Yes \_\_\_; No \_\_\_;

LIST ALL FOOD PRODUCTS that will be prepared or processed:

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LIST ALL EQUIPMENT used to prepare or process food:

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**BUILDING SIZE** \_\_\_\_\_ **NUMBER OF SEATS** \_\_\_\_\_

HOURS OF OPERATION \_\_\_\_\_ DAYS OF OPERATION \_\_\_\_\_ DATE OF OPENING \_\_\_\_\_

### DO YOU HAVE?

ARE EXHAUST HOODS INSTALLED? \_\_\_; IF SO, WHERE \_\_\_\_\_

HAS THIS EXHAUST SYSTEM BEEN APPROVED BY A LOCAL CODES DEPARTMENT? \_\_\_\_\_

WHAT WILL BE USED FOR WARE WASHING? COMMERCIAL DISHWASHER \_\_\_; THREE BAY SINK \_\_\_;

ARE TEST PAPERS OR KITS AVAILABLE TO CHECK CLEANING AND SANITIZER CONCENTRATIONS? \_\_\_;

