

Outdoor Food Operations - Plan Review Application

The Department of Food & Consumer Safety limits outdoor cooking to grilling and smoking of meats. The addition of grilling or smoking outside is subject to approval based on location, zoning requirements, and the ability to meet minimum requirements of the Marion County Public Health Department. The Department of Food & Consumer Safety follows the Conference for Food Protection Recommended Guidance for Outdoor Cooking Operations at Permanent Food Establishments that represents National standards for food safety practices. While outdoor grills do not have to be NSF/ANSI certified, they shall meet requirements of the Indiana Food Code.

Required Documentation

- ☐ Outdoor Food Operations - Plan Review Application
- ☐ Drawing/layout of the location of the outdoor grill and handwashing facilities.
 - o Drawing must include distance to entrance into the kitchen, access to restroom facilities, and indicate distance to neighboring businesses or residences.
- ☐ Drawing/photo/layout of the outdoor grill and grill attachments
- ☐ Specification sheets for equipment
- ☐ Drawing of the enclosed area used for storage of the grill (if grill is mobile)

Establishment Name & Location

1. Establishment Name: _____
2. Establishment Address: _____

Owner & Contact Information

3. Owner: _____
If the owner is a corporation, give the corporate name and the name of an officer of the corporation.
4. Owner's Full Mailing Address: _____

Owner's Phone: _____ Owner's Email: _____
5. Contact Person: _____
Contact's Phone: _____ Contact's Email: _____

Location of Outdoor Grill

6. Is the outdoor grill mobile, or permanently installed? _____
7. Is the outdoor grill located on the establishment premises? ☐ Yes ☐ No
(Note: Outdoor grills located off the establishment's premises cannot be permitted.)
8. Does the outdoor grill have a concrete or asphalt foundation? ☐ Yes ☐ No
If no, is the outdoor surface brick or cement blocks? _____
9. Are the exterior walking and driving surfaces sloped and graded to drain?
10. Is the outdoor grill located within 10 feet of combustible construction?
11. Describe the location of the outdoor grill at the establishment. **Include a drawing of the location.**

12. Will cooking on the outdoor grill be conducted during dark/low light hours? ☐ Yes ☐ No
Note: If yes to the above question, then shatter-resistant lights shall be provided.
13. Will any cooking be conducted overnight? ☐ Yes ☐ No
14. Will the outdoor grill be located in a publicly accessible area? ☐ Yes ☐ No

If yes to the above question, describe how public access will be controlled at the outdoor grill location to prevent consumers/others from interfering with the cooking operation.

Grill Construction and Setup

15. Does the grill have a stainless steel or cast-iron cooking surface? ☐ Yes ☐ No
16. Describe what overhead protection for the outdoor grill and utensils will be provided during cooking processes (roof, tents, awnings, canopies, whether temporary or permanent).
Note: Building and/or Fire inspection may be required to approve of overhead protection.

Describe the enclosed area where the outdoor grill will be stored when not in operation. (Outdoor grills shall be effectively protected from weather, insects, and rodents.) Include a drawing of the location.

How will insects be controlled when the outdoor grill is in operation?

Describe the cooking source/fuel used for the outdoor grill

Examples: charcoal, wood, gas, electric, etc.

Will garbage/waste be generated during the cooking processes? ☐ Yes ☐ No

If yes, then provide a covered garbage container at the grill location.

Food Processes

List the types of foods that will be cooked or reheated using the outdoor grill (raw meats, raw fish, pre-cooked meats, produce, etc.).

Describe cooking processes for the foods mentioned in the above question. (Attach additional sheets if needed.)

Describe how Time/Temperature Control for Safety (TCS) foods requiring cold holding (41°F or less) prior to cooking will be held and protected at the outdoor grill location until cooked or reheated.

Describe how cooked TCS foods will be monitored during the cooking process, and how cooking temperatures will be documented to ensure proper cooking temperatures are reached.

Describe how TCS foods requiring hot holding (135°F or higher) after cooking will be held and protected at the outdoor grill location until moved inside the establishment for processing.

Describe how utensils that are used to handle food will be protected during the cooking process.

Will additional condiments or sauces be used at the outdoor grill during the cooking process (such as basting sauces, etc.)? If so, describe how these condiments will be protected from environmental contamination.

Describe how cooked/reheated food will be transported back into the permitted establishment for processing (hand carry, rolling carts, etc).

Outdoor Food Operations – Storage Application

1. Provide a drawing of the area where the outdoor storage unit is located.
2. Provide the make, model number, and specifications sheets for the outdoor storage unit.

-
3. List all items that will be stored in the outdoor storage unit and describe how they will be transferred from outside storage to inside the main facility.
-
-
-

4. How will access to the outdoor storage unit be limited to approved personnel only? (Example: remains locked at all times)
-
-
-

5. Describe the surface the outdoor storage unit is located on: _____

6. How far is the outdoor storage unit from the main facility: _____

Is there a non-absorbent and easily cleanable walking path to the outdoor storage unit? ☐ Yes ☐ No

Is there a covered pathway provided to the outdoor storage unit? ☐ Yes ☐ No

Is the outdoor storage unit going to be used as a means of secondary storage? ☐ Yes ☐ No

Is adequate lighting provided? ☐ Yes ☐ No

Is a professional pest control company treating the area around the outdoor storage? ☐ Yes ☐ No

Is the outdoor storage unit hooked up to drain properly? ☐ Yes ☐ No

Is the outdoor storage unit rated and approved for outdoor use by the manufacturer? ☐ Yes ☐ No

Is the outdoor storage unit located within 10 feet of the dumpster? ☐ Yes ☐ No

Hours of Operation:

Days of Operation (check all applicable days)

☐ Sunday ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday

I certify that the information in this application is correct, and I understand that any deviation without prior approval from this Health Regulatory Office may nullify plan approval.

Printed Name of Applicant

Signature of Applicant

Date