

Food Premise – Notice of Intent and Assessment Checklist

This form is required to be submitted during the planning and consultation stage for food premises. It is intended to be used in conjunction with the **Guide to Opening a Food Premise**. Please email your completed form to EnvironmentalHealth@bchu.org or fax to 519-753-2140.

Section 1: Notice of Intent	
Business Name:	
Legal Name (if different than above):	
Proposed Date of Opening:	
Business Address:	Business Phone:
Fax:	Email:
City/Town:	Postal Code:
Mailing Address	
Address:	Telephone:
City/Town:	Postal Code:
Owner/Operator Contact Information	
Owner Name:	Operator Name:

BRANT COUNTY HEALTH UNIT

EnvironmentalHealth@bchu.org

Fax: 519-753-2140

519-753-4937 ext. 470

www.bchu.org

Section 2: Facility Checklist

A. Operations Type:

What type of food premise will you be operating?

- Dine-in restaurant/eating establishment
- Take-out food service
- Catering
- Home-based
- Food truck/trailer
- Other – please explain:

B. Water Supply:

What type of water supply will service your premise?

- Municipal
- Well water
- Potable water cistern or holding tank

C. Sewage Disposal:

What type of sewage disposal system will service your premise?

- Municipal
- Septic system
- Holding tank

Section 3: Food Preparation and Handling Checklist

Please answer all questions

1. Will you be preparing only low-risk foods and/or selling/serving only prepackaged, ready-to-eat foods?
*E.g., low-risk foods that do not require time and temperature control after preparation. Examples include most baked goods.
Pre-packaged, ready-to-eat food are foods that have been prepared and packaged at another approved food premise and do not require further preparation before eating. Examples include packaged yogourt, cheese, salads, deli meats, etc.).*

Yes

No

If yes, please list your products:

2. Will you be preparing or serving potentially hazardous foods?
E.g., finished food products that require time and temperature control in order to keep them safe. Examples include meat, poultry, seafood, eggs or dessert made with real cream and/or custard).

Yes

No

If yes, please list your products:

3. Will you be conducting any of the following activities: canning, curing, dehydrating, emulsifying, fermenting, or smoking of a meat product?

Yes

No

If yes, please refer to the decision tree in the following link to determine if you are a [Free Standing Meat Plant](http://www.omafra.gov.on.ca/english/food/inspection/meatinsp/decisiontree.htm).
(www.omafra.gov.on.ca/english/food/inspection/meatinsp/decisiontree.htm)

4. Will you be conducting any canning/jarring of any food other than meat products?

Yes

No

If yes, please list items:

Please review the following guidance on proper processing:

- [Food and Beverage Manufacturing – Food Preservation and Processing](http://www.omafra.gov.on.ca/english/food/business-development/guide.pdf)
(www.omafra.gov.on.ca/english/food/business-development/guide.pdf)
- [Public Health Ontario – Home Canning](http://www.publichealthontario.ca/-/media/documents/h/2014/home-canning.pdf?la=en)
(www.publichealthontario.ca/-/media/documents/h/2014/home-canning.pdf?la=en)

5. Are you a certified food handler?

Yes

No

If yes, please provide the name of the food handler training program and the date you received your certificate:

Food service premises where potentially hazardous food are prepared must have at least one certified Food Handler present during all hours of operation.

6. Will you be using a residential dwelling for any aspect of your food premise business? This includes any food storage or preparation.

Yes

No

If yes, please describe the proposed usage:

Note: A fully separate and dedicated kitchen, preparation and storage area is required.

7. Will you be renting time/space in a pre-existing, approved kitchen facility?

Yes

No

If yes, please provide a written Letter of Agreement from this facility to the Brant County Health Unit.

8. Please indicate your proposed business hours:

9. Please provide the names and addresses of all food suppliers you intend to use for your business:

10. How/where will you distribute/sell or serve your food products?

11. Will you be preparing and pre-packaging food products for retail?

Yes

No

In Canada, labelling of pre-packaged foods for retail is under federal jurisdiction. If you answered yes to above, please review the [federal labelling requirements](https://bit.ly/RetailFoodBGCCA) (<https://bit.ly/RetailFoodBGCCA>) and contact the Canadian Food Inspection Agency at 1-800-442-2342.

Section 4: Planning Checklist

Have you contacted the following municipal departments?

Zoning

Yes

No

Licensing

Yes

No

Building

Yes

No

Fire

Yes

No

Note: If you answered no to any of the above, please contact them as soon as possible to review your proposed business plans.

Have you completed the following tasks?

Reviewed the Guide to Opening a Food Premise?

Yes

No

Submitted floor plans?

Yes

No

Note: If you answered no to any of the above, please complete as soon as possible. Please refer to the floor plan section of the **Guide to Opening a Food Premise** for details and requirements.