

INSPECTING AGENCIES SIGN OFF FORM FOR RETAIL FOOD ESTABLISHMENT and FOOD SERVICE OPERATIONS

Operation Name _____
 Address _____
 Telephone Number _____

Owner/Operator Name _____
 Address _____
 Telephone Number _____

Zoning Approval (If applicable) _____
Inspector Date

* Building Approval _____
Inspector Date

* Electrical Approval _____
Inspector Date

Plumbing Approval _____
Inspector Date

* Fire Approval _____
Inspector Date

EPA Approval (If applicable) **Water System** _____
Env. Engineer Date

Sewage System _____
Env. Engineer Date

* Note: **Copies of signed inspecting agencies' reports or certificate of occupancy may be submitted in lieu of inspector's signatures on this form.**

Comments: _____

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