



**WORCESTER COUNTY HEALTH DEPARTMENT**  
**INSTRUCTIONS FOR FOOD SERVICE FACILITY CHANGE OF OWNERSHIP WITH**  
**NO CHANGES TO OPERATION, EQUIPMENT, OR FACILITY**

*Office of Environmental Health*  
*13070 St. Martin's Neck Road, Bishopville, MD21813*  
*Phone 410-352-3234 or 410-641-9559*

Pursuant to Code of Maryland Regulations (COMAR) 10.15.03.28 F, a license may not be transferred from one person to another person or from one food service facility to another. Therefore, you must submit the following to Worcester County Health Department **BEFORE** you operate a food service facility.

1. Application for License to Operate a Food Service Facility
2. Workers' Compensation Insurance Certification
3. Proposed Menu and Food Safety Plan (HACCP plan)
4. Diagram of floor layout/equipment arrangement, drawn to scale
5. Numbered equipment list that corresponds to the floor plan, including model numbers

**ATTENTION:**

**ANY CHANGES TO THE EXISTING OPERATION, EQUIPMENT OR FACILITY REQUIRES A PLAN REVIEW AND APPROVAL BY THE DEPARTMENT PRIOR TO BEGINNING ALTERATIONS, INSTALLATION OF EQUIPMENT, CONSTRUCTION, OR OPERATION OF THE FACILITY.** Properly prepared plans, specifications, plan review fee, and a completed plan review application must be submitted to the Department to facilitate review and approval of construction or material alterations.

# EQUIPMENT LIST

Include each piece of food service equipment by manufacturer and model number, if catalogue unit. Give a description of construction for custom-built equipment. If a drawing to illustrate construction is required, you will be notified.

New equipment shall comply with design standards of the Maryland State Department of Health. In general, the design standards of the State Department of Health are the same as the applicable standards of the National Sanitation Foundation, Commercial Refrigeration Manufacturer's Association and Bakery Industry Sanitation Standards Committee. Where these standards are in conflict with State Laws, codes, or regulations, the State laws, codes or regulations will prevail. Ask the plan review personnel for illustrations or design standards appropriate to the plans submitted.

	ITEM	MANUFACTURER	MODEL NO.	REMARKS (office use)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

# Food Safety Plan

Based on Hazard Analysis Critical  
Control Point (HACCP) Principles

**\*Keep in food preparation area\***

CCP:     COLD HOLD    

**CCP and Critical Limits:**

All items are to be Cold Held at 41°F or below at all times.

**Monitoring:**

Internal food temperature to be monitored every \_\_\_\_\_ to verify proper temperature maintenance.

**Corrective Actions:**

If internal food temperature rises above 41°F:

For less than 4 hours: all food items to be removed and rapidly re-chilled to 41°F or below.

If food out of temperature for greater than 4 hours, or an unverifiable amount of time (i.e. no temp logs available): food is to be discarded.

**Verification:**

Person in charge will ensure that internal food temperatures are monitored at interval specified above and that corrective actions are taken if standard not met.

**Equipment Used:**

**Menu items using this CCP:** ( \*Include all menu items that utilize this step)

CCP: Cooking

**CCP and Critical Limits:**

Foods are cooked to temperatures specified in the Standard Operating Procedures.

**Monitoring:**

Internal product temperature of food is taken while cooking using a metal stemmed thermometer.

**Corrective Actions:**

If food has not reached required temperature for specified time, continue cooking.

**Verification:**

Person in charge will ensure that temperatures are being taken and if not satisfactory, food is returned to cooking equipment until the required time and temperature standards are met.

**Equipment Used:**

**Menu items using this CCP:** : (\*Include all menu items that utilize this step)

**CCP: HOT HOLD**

**CCP and Critical Limits:**

Foods are Hot Held at a minimum of 135°F.

**Monitoring:**

Internal temperature of food is taken at least every \_\_\_\_\_ using a metal stemmed thermometer.

Hot Holding Equipment temperature will be checked every \_\_\_\_\_.

**Corrective Actions:**

If internal food temperature falls below 135°F and:

out of temperature for 4 hours or less, product will be rapidly reheated to 165°F ;

out of temperature for an unverifiable time or a time greater than 4 hours, product will be discarded.

**Verification:**

Person in charge will ensure that temperatures are being taken at intervals specified above and if the temperature is not acceptable, corrective actions are followed.

**Equipment Used:**

**Menu items using this CCP:** : ( \*Include all menu items that utilize this step)

CCP: Cooling

**CCP and Critical Limits:**

Foods are cooled from 135°F to 70°F within 2 hours, and from 70 to 41 within an additional 4 hours.

**Monitoring:**

Internal product temperature of food is taken at 1.5 and 6 hours with a metal stemmed thermometer.

**Corrective Actions:**

If food is not  $\leq 70^{\circ}\text{F}$  at 1.5 hours, food will be iced, stirred, or broken into smaller containers. Food that has not reached  $41^{\circ}\text{F}$  within 6 hours will be discarded.

**Verification:**

Supervisor will ensure that temperatures are being taken at proper times and, if not taken or not satisfactory, that corrective actions listed above are taken.

**Equipment Used:**

**Cooling Method(s) Utilized:**

**Menu items using this CCP:** ( \*Include all menu items that utilize this step)

CCP: Reheating

**CCP and Critical Limits:**

Foods are cooked to temperatures below for specified time:  
All foods are **reheated** to **165°F**.

**Monitoring:**

Internal product temperature of food is taken at completion of cooking time using a metal stemmed thermometer.

**Corrective Actions:**

If food has not reached required temperature for specified time, continue cooking. Recheck temperature after additional cooking to make sure standard is reached.

**Verification:**

Supervisor will ensure that temperatures are being taken and if not satisfactory, food is returned to cooking equipment until the required time and temperature standards are met.

**Equipment Used:**

**Menu items using this CCP:** : ( \*Include all menu items that utilize this step)



# STANDARD OPERATING PROCEDURE'S (SOP'S) FOR HAZARDOUS ANALYSIS CRITICAL CONTROL POINT (HACCP) PLANS

## RECEIVING:

### Standard:

All food must be from approved sources. Foods must be wholesome and not adulterated. No home-prepared foods can be present in a food service facility. Severely dented, rusty, or swollen cans must be rejected. All meats and poultry must be USDA inspected. All eggs must be from USDA registered flocks. All shellfish must be from FDA approved harvesters and must be provided with shell stock tags. The shellstock tags and egg records must be maintained on site for 90 days.

### Monitoring:

Inspect incoming product for package integrity. Measure product temperature to ensure the product has been received at a compliant temperature. Pasteurized crab meat and vacuum packed meats with no preservatives must be refrigerated at 38°F or below. All other refrigerated product must be 41°F or below and frozen product must be fully frozen upon delivery. Inspect shellfish and other seafood products for freshness.

### Corrective Action:

Reject delivery or discard product if criteria is not met.

### Verification:

Person in charge visually observes that employees are inspecting incoming product for package integrity and that temperature monitoring is being conducted if necessary.

## STORAGE:

### Standard:

Frozen products must be fully frozen. Pasteurized crab meat and vacuum packed meats with no preservatives must be refrigerated at 38°F or below. All other refrigerated products must be stored at 41°F or below. Store raw refrigerated animal food products separate from refrigerated ready-to-eat foods. If stored on same set of shelves, raw animal foods must be stored below ready-to-eat foods. Foods must be stored only in designated areas. Protected foods must be stored a minimum of 6 inches above the floor; exposed food must be stored at least 18 inches above the floor.

### Monitoring:

While the facility is in operation, check temperature of refrigeration and freezer units a minimum of every 4 hours.

### Corrective Action:

If a storage freezer is not working properly, move foods to freezer unit capable of maintaining frozen foods. If frozen product has begun to thaw, move to refrigerated unit maintaining 41°F or below and cook within 72 hours.

If a refrigerator is not maintaining 41°F or below, and if the product was out of temperature for a verifiable time of less than 4 hours then move the product to a unit properly maintaining 41°F or below. If the product temperature was above 41°F for an unverifiable time or longer than 4 hours then discard the product.

### Verification:

Review temperature logs of storage units if available. If temperature logs are not utilized, the supervisor will visually observe that unit temperatures are monitored by employees and corrective actions are taken when warranted.

## **THAWING:**

### Standard:

Food products must be thawed in a refrigerator at 41°F or below, under potable running water that is at or below 70°F, in a microwave oven only if product is being cooked immediately or as part of the conventional cooking process.

### Monitoring:

Monitor temperature of refrigerator to ensure unit is maintaining 41°F or below for proper thawing.

Ensure running water is less than 70°F with sufficient force to agitate and float off loose particles if this process is used.

Ensure product is immediately cooked after thawing in the microwave.

### Corrective Action:

Any food items that have begun the thawing process must be cooked within 72 hours.

If a refrigerator is not maintaining 41°F or below, and if the product was out of temperature for a verifiable time of less than 4 hours then move the product to a unit properly maintaining 41°F or below.

If the product temperature was above 41°F for an unverifiable time or longer than 4 hours then discard the product.

Foods not cooked immediately after thawing in the microwave are discarded.

### Verification:

Supervisor visually observes that employees are thawing foods properly and that corrective actions are taken when needed.

## **PREPARATION/PROCESSING/ASSEMBLING:**

### Standard:

Food workers prevent contact of exposed, ready-to-eat food with their bare hands by using gloves or utensils such as tongs or deli paper. Cross contamination is prevented by not allowing contact between ready-to-eat and raw foods. Utensils used in food preparation are clean and sanitized. Fruits and vegetables are free of dirt, etc. prior to processing. The time that potentially hazardous items are removed from temperature control for processes such as portioning, slicing and mixing must be minimized.

### Monitoring:

All raw fruits and vegetables are washed thoroughly to remove soil and other contaminants before cutting, cooking, or serving. Managers will ensure employees are properly utilizing gloves or other approved method when handling ready-to-eat foods. Ensure that the time that potentially hazardous foods are out of temperature control for preparation is minimized.

### Corrective Action:

Any food items contaminated by bare hands, unclean utensils, etc. are discarded. Discard product if out of temperature control for an extended period of time for preparation.

### Verification:

Supervisor visually observes that proper techniques are being utilized during food preparation and ensures that corrective actions are being taken when monitoring procedures are not met.

## **COOKING:**

### Standard:

All potentially hazardous foods must be cooked to the following proper minimum internal temperature for 15 seconds unless otherwise noted:

- Pork; Ham 145°F
- Comminuted fish/meats 155°F
- Ground Beef 155°F
- Roast Beef 130°F for 121 minutes for immediate service
- Poultry; Stuffing; Stuffed Meat 165°F
- Shelled Eggs 155°F
- Shelled Eggs 145°F for immediate service
- Ready to eat commercially processed foods 135°F
- All others not specified 145°F

Certain foods may be cooked to order for immediate service upon customer request, provided that a consumer advisory is provided and process is approved in the HACCP plan.

### Monitoring:

A consumer advisory is provided on the menu or in another approved form when an animal food, such as beef, eggs, fish, lamb, pork, poultry, or shellfish, is served raw or undercooked. The HACCP plan must specify that raw or undercooked items are offered and must include method of customer notification. Advisory must state "consuming raw or undercooked animal foods may increase your risk of contracting a foodborne illness, especially if you have certain medical conditions". Internal product temperatures will be checked using a calibrated stem thermometer.

### Corrective Action:

Product will continue to cook until proper temperatures are reached.

### Verification:

Review cooking temperature logs. If cooking logs are not utilized, the supervisor must visually observe that temperatures are taken at the proper times and if unsatisfactory, food is returned to the cooking equipment until the required time and temperature standards are met. Supervisors must also verify that thermometers are properly calibrated.

## **HOT HOLDING:**

### Standard:

All food items are hot held at a temperature of 135°F or above.

### Monitoring:

Internal product temperatures will be checked using a calibrated stem thermometer at regular intervals as specified in HACCP plan or at a minimum of every two hours.

### Corrective Action:

Food item is rapidly reheated to a minimum temperature of 165°F if the food was below 135°F for a verifiable period not exceeding 4 hours. Product is discarded if the food was below 135°F for more than 4 hours or the time the food had been out of temperature is not verifiable.

### Verification:

Monitor temperature logs, and/or observe temperature monitoring and calibration practices.

## **COOLING:**

### Standard:

Potentially hazardous cooked food's internal temperature is cooled from 135°F to 70°F within 2 hours and from 70°F to 41°F or less within an additional 4 hours. Cooling is accomplished by refrigerating in shallow pans less than 3 inch food depth with vented cover, reducing food mass by separating foods into smaller portions, use of ice water baths combined with frequent stirring or use of other effective method acceptable to the approving authority. Cooling method of foods must be documented in the approved HACCP plan for facility.

### Monitoring:

Internal product temperature will be checked using a calibrated stem thermometer at regular intervals as specified in HACCP plan, at a minimum of every two hours.

### Corrective Action:

If internal product temperature does not reach 70°F within 2 hours, rapidly reheat product to 165°F and begin cooling process again. If internal product temperature does not reach 41°F within the additional 4 hour time period, product will be discarded.

### Verification:

Review cooling logs, and/or observe temperature monitoring procedures.

## **REHEATING:**

### Standard:

Potentially hazardous foods that have been cooked, cooled, and refrigerated are reheated to an internal temperature of 165°F or above within 2 hours. Ready to eat foods taken from a commercially processed, hermetically sealed container or from an intact package from a food processing plant that is inspected by a food regulatory authority is reheated to a minimum of 135°F.

### Monitoring:

Internal product temperature will be checked using a calibrated stem thermometer at regular intervals as specified in HACCP plan.

### Corrective Action:

Product will be discarded if it fails to reach 165°F within 2 hours.

### Verification:

Monitor temperature logs, and/or observe temperature monitoring and calibration practices.

## **HAND WASHING:**

### Standard:

Hand washing must be performed prior to the start of handling foods and after eating, drinking, smoking, sneezing, coughing, using the restroom, handling soiled equipment or utensils, and handling raw animal products. Hands must be washed for a minimum of twenty seconds while utilizing soap and warm water. Hands must be dried with paper towels, hand dryer or other approved method.

## **DISHWASHING:**

### Standard:

Dishes, utensils and equipment must be flushed of all debris, then washed with hot soapy water in the first compartment, rinsed in hot clear water in the second compartment, and sanitized in the third compartment. The time and strength will be dependant on the type of sanitizer utilized. Chemical test strips must be provided to ensure the proper sanitizer strength is utilized. Dishes, utensils and equipment must air dry prior to stacking and putting away.

## **WIPING CLOTHS:**

### Standard:

If wiping cloths are to be utilized, they must be stored in a container of sanitizer solution between uses. If utilizing chlorine, the sanitizer strength must maintain a minimum of 50 ppm. Any debris on the cloth must be disposed of in the garbage, prior to placing the cloth into the sanitizer solution.

## **WRITTEN PROCEDURES FOR EMPLOYEE HACCP TRAINING**

Implementation of the Hazard Analysis Critical Control Point (HACCP) plan in your establishment will give you the greatest assurance possible that the food you are serving to your customers is safe. In order to prevent foodborne illness, HACCP targets the critical steps in preparing and serving potentially hazardous foods. The HACCP plan that is approved for your facility is intended to be used as a reference and a training tool for all food workers.

All employees will be trained to use the approved HACCP plan prior to beginning employment and periodically after that. Training will include identification of the processes that are critical control points, how these processes will be monitored, and what corrective actions must be taken when standards are violated. The approved HACCP plan will be available in the food preparation area at all times.

At a minimum, I will train all food workers in approved methods on the following:

- Hand washing
- Glove use
- Cleaning and sanitizing utensils, equipment, and food preparation surfaces
- Weekly calibration of a metal stem thermometer

I have read the above information and agree to train my staff in all areas listed in this Standard Operating Procedures (SOP) document.

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Printed Name

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Title

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Signature

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Date

**Return To:**  
WCHD-Office of Environmental Health  
13070 St. Martin's Neck Road  
Bishopville, MD 21813  
Phone: 410-352-3234 or 410-651-9559

<b>Type of Facility:</b>	<b>Inspection Fee</b>
<input type="checkbox"/> Moderate/High Priority	<b>\$190.00</b>
<input type="checkbox"/> Low Priority	<b>\$125.00</b>
<input type="checkbox"/> Prepackaged Priority	<b>\$125.00</b>

**\*\*Make Checks Payable to: Worcester County Commissioners\*\***

**Food Service Facilities  
Request for Change of Ownership Inspection**

Date of Transfer \_\_\_\_\_ Anticipated Opening Date: \_\_\_\_\_

New Name of Facility \_\_\_\_\_

Former Name of Facility \_\_\_\_\_

Mailing Address \_\_\_\_\_

Location of Facility \_\_\_\_\_

Owner of Business \_\_\_\_\_ If Corp./LLC \_\_\_\_\_

OFFICERS NAMES & TITLES

Facility Phone No. \_\_\_\_\_ Owner Phone \_\_\_\_\_

**Type of Facility**

- |  |  |
|--|--|
| <input type="checkbox"/> Full Service Restaurant and/or Lounge | <input type="checkbox"/> Bar/Tavern/Night Club (no food) |
| <input type="checkbox"/> Carry Out Only                        | <input type="checkbox"/> Grocery/Market/Deli             |
| <input type="checkbox"/> Bakery                                | <input type="checkbox"/> Pre-packaged Market             |
| <input type="checkbox"/> Confessions (ice cream, candy, etc.)  | <input type="checkbox"/> Satellite                       |
| <input type="checkbox"/> Other (specify) _____                 |  |

Seating  Yes  No

Alcohol License  Yes  No  Applied/Applying

The following information ***must*** be submitted **prior to scheduling** a change of ownership inspection.

- |  |   |
|--|---|
| <input type="checkbox"/> Change of Ownership Fee   | <input type="checkbox"/> Menu Review/HACCP Plan                         |
| <input type="checkbox"/> Current Floor Plan  | <input type="checkbox"/> Equipment List                                 |
| <input type="checkbox"/> Application for Licensure   | <input type="checkbox"/> Worker's Compensation Information              |
| <input type="checkbox"/> Annual License Fee  | <input type="checkbox"/> Wor. County Building/Zoning Permit Application |
| <input type="checkbox"/> Proof of Ownership (business license, settlement documentation, etc.) |   |

I hereby state that the above information is accurate and truthful.

**APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PRINT NAME** \_\_\_\_\_ **POSITION** \_\_\_\_\_

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**OFFICE USE ONLY**

Est. No. \_\_\_\_\_ Sanitarian \_\_\_\_\_ Priority Assessment \_\_\_\_\_

Date Issued \_\_\_\_\_ Date Expires \_\_\_\_\_ Worker's Comp. \_\_\_\_\_

Comments \_\_\_\_\_



SEND APPLICATION TO:  
 Worcester County Health Department  
 13070 St. Martin's Neck Road  
 Bishopville, MD 21813

Date \_\_\_\_\_  
 410-352-3234 or 410-641-9559  
 Checks payable to: Worcester County Commissioners

**APPLICATION FOR LICENSE TO OPERATE A FOOD SERVICE FACILITY**

Application is hereby made to operate a food service facility in accordance with COMAR 10.15.03 Regulations Governing Food Service Facilities.

PLEASE PRINT CLEARLY OR TYPE

FACILITY NAME \_\_\_\_\_

NEW OWNER:  YES  NO FORMER NAME (if any) \_\_\_\_\_

MAILING (Correspondence) ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

OWNER(S) OF BUSINESS \_\_\_\_\_ IF CORP. /LLC. \_\_\_\_\_

E-MAIL \_\_\_\_\_ FAX # \_\_\_\_\_ Officers Names & Titles \_\_\_\_\_

OWNER'S MAILING ADDRESS \_\_\_\_\_

FACILITY PHONE \_\_\_\_\_ OWNER PHONE \_\_\_\_\_

EXACT LOCATION \_\_\_\_\_

NORMAL DAYS & HOURS OPEN FOR BUSINESS \_\_\_\_\_

**FACILITY INFORMATION (check all applicable boxes)**

- |   |   |
|---|---|
| <input type="checkbox"/> Full Service Restaurant/Lounge | <input type="checkbox"/> Mobile Unit Year _____ Make _____                  |
| <input type="checkbox"/> Confections (Candy, Ice Cream) | Model _____ Tag# _____  |
| <input type="checkbox"/> Grocery-Market/Deli            | <input type="checkbox"/> Nonprofit kitchen (church, fire co., school, etc.) |
| <input type="checkbox"/> Market/Prepackaged             | <input type="checkbox"/> Carry Out Available                                |
| <input type="checkbox"/> Bakery                         | <input type="checkbox"/> Carry Out Only                                     |
| <input type="checkbox"/> Bar/Lounge/Liquor Store        | <input type="checkbox"/> Soft serve Ice Cream/Yogurt                        |
| <input type="checkbox"/> Other                          |   |

**SEATING**

Yes  No

Inside:  Yes  No Outside:  Yes  No

**LENGTH OF OPERATION**

Year 'round

Seasonal From \_\_\_\_\_ To \_\_\_\_\_ (Month/Date)

ALCOHOLIC BEVERAGE LICENSE  Yes  No WATER SUPPLY  Public  Private

SEWERAGE  Public  Private

Please complete and sign both front and back pages. If application is not complete, it will be returned to you.  
 Allow 10 business days for processing of your food service operating license.

APPLICANT'S SIGNATURE \_\_\_\_\_ POSITION \_\_\_\_\_

AMOUNT OF FEE ENCLOSED  \$330.00  \$150.00  \$100.00  N/A  \$10.00 Certified Letter Fee

(Check all applicable boxes)  \$50.00 per Day Late Fee (Maximum Late Fee - \$300.00)

**\*\*\*PLEASE MAKE CHECKS PAYABLE TO WORCESTER COUNTY COMMISSIONERS\*\*\***

**OFFICE USE ONLY**

Change of Ownership

I.D. Number \_\_\_\_\_ Sanitarian \_\_\_\_\_ Priority Assessment \_\_\_\_\_

Date Issued \_\_\_\_\_ Date Expires \_\_\_\_\_ Workmen's Comp Statement \_\_\_\_\_

Comments \_\_\_\_\_

Environmental Programs Approval
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Worcester County

HEALTH DEPARTMENT

P.O. Box 249 • Snow Hill, Maryland 21863-0249  
www.worcesterhealth.org

Snow Hill (Main Office)  
410-632-1100  
Fax 410-632-0906

Rebecca L. Jones, RN, BSN, MSN  
Health Officer

STATEMENT OF WORKERS' COMPENSATION INSURANCE

Maryland Health-General Code Annotated Section 1-202 requires that before any license or permit be issued under the Health-General Article to an employer to engage in an activity in which the employer may employ any individual, the employer must file with the issuing authority a certificate of compliance with the State Workers' Compensation Laws indicating the employer's Worker' Compensation insurance policy or binder number. Waiver or certificate of compliance can be obtained by calling the Workers' Compensation Commission at 410-864-5100.

CIRCLE the number of the option below which applies to you, provide the requested information, sign and date the form, and return it with the attached application. (**NOTE: License cannot be issued without completion of this form.**)

1. I have Workers' Compensation insurance.

Insurance Company \_\_\_\_\_ Policy/Binder No. \_\_\_\_\_

Agent \_\_\_\_\_ Phone Number \_\_\_\_\_

2. A waiver has been received from the Workers' Compensation Commission. (A COPY OF THE WAIVER MUST BE ATTACHED BEFORE A LICENSE WILL BE GRANTED.)

3. As provided by Maryland Annotated Code Article 101, I am exempt from having Workers' Compensation insurance. (Circle option a or b below.)

a. Attached is a copy of the certificate of compliance.

b. I have applied for a certificate of compliance from the Workers' Compensation Commission on \_\_\_\_\_ Copy of certificate will be forwarded to Worcester County Office of Environmental Health upon receipt.

4. I am self-insured. Approval of self-insurance has been received from the Workers' Compensation Commission. (A COPY OF THE CERTIFICATE OF COMPLIANCE MUST BE ATTACHED BEFORE A LICENSE WILL BE GRANTED.)

5. I have no employees, therefore I am not required to carry Workers' Compensation insurance.

\_\_\_\_\_  
SIGNATURE/TITLE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
FACILITY NAME

\_\_\_\_\_  
TITLE