



HEALTH AND HUMAN SERVICES DEPARTMENTS
 Human Services Phone: (970) 641-3244 Fax: (970) 641-3738
 Public Health Phone: (970) 641-0209 Fax: (970) 641-8346
 225 N Pine St, Gunnison, CO 81230
 Website: www.GunnisonCounty.org

RETAIL FOOD ESTABLISHMENT REVIEW APPLICATION

This form will be used by the Health Department for various review fees for retail food establishments as provided in statute 25-4-1601 to 1612, C.R.S.

Gunnison County Health and Human Services Department
 225 N. Pine Street
 Gunnison, CO 81230

Date: _____

Record ID # _____

**Do Not Write in This Space
 For Office Use Only**

Name of Establishment:			
Location Address:			
City:	State:	Zip:	County:
Mailing Address:			
City:	State:	Zip:	
Name of Owner/Manager:			Phone: ()
DBA:			Email:
Type of Ownership (As indicated on your Colorado Business/State Sales Tax Registration) <input type="checkbox"/> Individual <i>(If individual or sole proprietor owner, you must complete the enclosed affidavit and provide a notarized copy of an approved identification)</i> <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Liability Limited Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> "S" Corporation <input type="checkbox"/> Association <input type="checkbox"/> Estate <input type="checkbox"/> Government <input type="checkbox"/> Joint Venture <input type="checkbox"/> Trust <input type="checkbox"/> Non-profit 501(c)(3) (please enclose copy of IRS letter of exemption) <input type="checkbox"/> Other Non-profit			

NOTICE TO APPLICANT: The type of review requested and associated application fee required is indicated in Section A below. If an application fee is required, please make check payable to Gunnison County Health and Human Services and mail the completed application and check to the address above. Fees for the actual review are explained on the next page.

Name & Title of Applicant (Please Print): _____

Signature of Applicant _____

SECTION A – THIS SECTION TO BE COMPLETED BY INSPECTOR

REVIEW TYPE	APPLICATION FEE	REVIEW FEE (NOT TO EXCEED)
<input type="checkbox"/> Plan Review (PR)	\$100.00	\$580.00
<input type="checkbox"/> HACCP Plan Review/Written (HW)	Not Required	\$100.00
<input type="checkbox"/> HACCP Plan Review/Operational (HO) Services	Not Required	\$400.00
<input type="checkbox"/> Requested – Real Estate Review (RE)	\$75.00	Cost of Actual Time Spent
<input type="checkbox"/> Special Event (SE)	Not Required	Not Required
<input type="checkbox"/> Special Service (SS) _____	Not Required	Not Required
<input type="checkbox"/> Fee Exempt (EX) _____	Not Required	Not Required

Comments:

Plan Review (PR):

The fee for filing an application for a plan review is \$100.00, and must accompany the application (when required). The application filing fee does not include the cost of plan review activities. An invoice for the actual time spent on review activities will be sent to you at a later date and will not exceed \$580.00.00 [(CRS 25-4-1607(2)]. There will be a delay in reviewing your plan review if either the application fee or the application form are not submitted with the plans.

HACCP (Written) (HW):

An application filing fee is not required for this review process. Upon completion of the written review, an invoice for actual time spent on the review activities will be sent to you. The invoice will not exceed \$100.00. [(CRS 25-4-1607(4)].

HACCP (Operational) (HO):

An application filing fee is not required for this review process. Upon completion of the operational review, an invoice for actual time spent on the review activities will be sent to you. The invoice will not exceed \$400.00. [(CRS 25-4-1607(4)].

Note: If an HACCP plan undergoes significant changes from the original approved plan, the second review may be billed as a new plan. A facility may be required to have separate HACCP plans for food preparation methods that deviate from more than one section of the regulation. An HACCP plan is not considered part of the plan review process. Separate charges can be applied to an HACCP plan that were included with a facility's plan submittal.

Real Estate (RE):

A \$75 pre-paid fee is required with this application, but shall be applied to the actual cost of the services. Additional fees will be added upon completion of the review. An invoice for actual time spent on the review activities will be sent to you [(CRS 25-4-1607(5)].

Special Events (SE):

No application filing fee is required. Actual cost of services associated with the oversight of a special event will be billed when services are completed [(CRS 15-4-1607(6)].

Special Services (SS):

The fee for any other requested service that involves review activities and that are not specifically listed above are chargeable based on the actual cost of such service [(CRS 25-4-1607(7)].

Fee Exempt (EX):

Parochial, public and private schools, penal institutions, and charitable organizations (benevolent, nonprofit retail food establishments) are exempt from the fees associated with plan review activities.