

Online Plan Submission Instructions

County of San Diego

Department of Environmental Health and Quality

Food and Housing Division



Department of Environmental Health & Quality

Food and Housing Division

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Guide to Submitting a Plan Check Application Online

Getting Started

Becoming a Registered User. The Online Plan Check Application process requires the public to register for an account to apply and submit new plans and resubmissions for a food/pool/body art/massage facility. This Help Guide focuses on the process for submitting food and pool facility plans for Department of Environmental Health and Quality (DEHQ) review.

- **Account Creation.** You must be a *Registered User*, within Accela Citizen Access (ACA), to submit an application with plans. Required fields have a red asterisk (*).
 - Click on [Accela Citizen Access \(ACA\)](#) to access the webpage directly.
 - Or visit the Department of Environmental Health and Quality's [home page](#) and under “Popular Services” click on “Pay Fees Online.”

Popular Services
Food Publications
Home Kitchen Operations (CFOs & MEHKOs)
Vector Service Request
Hazardous Materials Info
Pay Fees Online
Apply for Permits Online
Request Public Records
DEHQ Document Library
More Services

- To register, click on “Register for an Account” at the upper right hand corner of the home screen, “Register Now” in the dialogue box, or “New Users: Register for an Account” under the Login button.

The screenshot shows the San Diego County.gov website. At the top, there is a navigation bar with the county seal and the text "SanDiegoCounty.gov". Below this, there are links for "Announcements", "Register for an Account", and "Login". A search bar is also present. The main content area has a navigation menu with "Home", "APCD", "AWM", "DEHQ", "DPW", and "PDS". Below the navigation menu, there is a section titled "Please Login" with instructions for existing users. To the right of this is a "Login" form with fields for "User Name or E-mail:" and "Password:", and a "Login »" button. Below the login form, there is a checkbox for "Remember me on this computer" and a link for "I've forgotten my password". At the bottom of the login section, there is a link for "New Users: Register for an Account". On the left side of the main content area, there is a section titled "New Users" with instructions for new users and a "Register Now »" button.

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- **Read through, acknowledge that you have read and accept the General Disclaimer, and click “Continue Registration” button.**

Please review and accept the terms below to proceed.>

General Disclaimer

While the County attempts to keep its web information accurate and timely, the County neither warrants nor makes representations as to the functionality or condition of this website, its suitability for use, freedom from interruptions or from computer virus, or non-infringement of proprietary rights. Web materials have been compiled from a variety of sources and are subject to change without notice from the County as a result of updates and corrections.

☐ I have read and accepted the above terms

Continue Registration »

- **Login Information.** Enter a user name, email address, and password, and create a security question and answer, then click “Add New” button.

Account Registration Step 2: Enter/Confirm Your Account Information

Login Information

* User Name: ?

* E-mail Address:

* Password: ?

* Type Password Again:

* Enter Security Question: ?

* Answer: ?

Contact Information

Choose how to fill in your contact information.

Add New

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- **Contact Information.** Click the **“Add New”** button to enter all the requested information. Not entering all of the requested information may delay your application processing time. Once complete, click the **“Continue”** button.

Contact Information

* First: Middle: * Last:

* City:

* State:

Name of Business:

* Zip:

Country:

Business Phone: Mobile Phone: Home Phone:

* Address Line 1:

Fax:

E-mail:

Continue **Clear** [Discard Changes](#)

- If you're contact information has never been used in this system, the following pop-up will appear. Click the **“Continue”** button to proceed.

The information you entered is not found. Click Continue to create a new account. Click Cancel to change the information.

Continue **Cancel**

- Review your contact information for accuracy and then click on **“Continue Registration”** button.

Continue Registration »

- Now you can login using your new registered user account and you will be able to submit a new application with plans. You should see the following:



Your account has been created successfully. You may now log in with your new credentials.

Department of Environmental Health & Quality

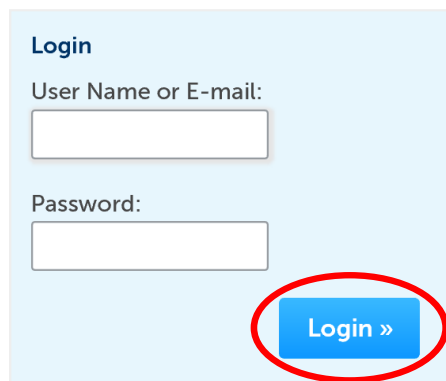
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Submitting an Application with Plans:

The instructions below are for the submittal of your Food or Pool Plan Check application and plans, including: new construction, minor remodels, resubmissions, and plan revisions.

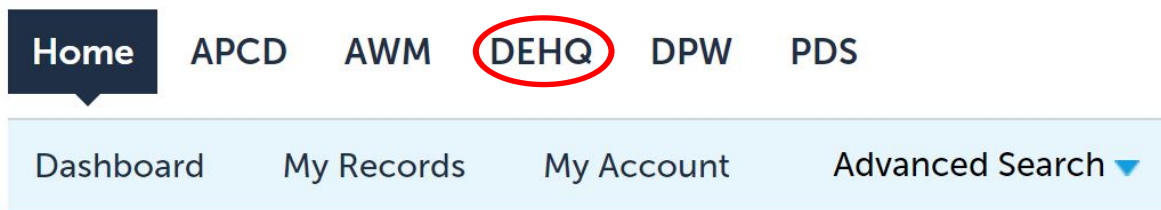
Step 1 – Login:

- Go to the [Accela Citizen Access](http://www.dehpay.com) home page. You can also access Accela Citizen Access by going to <http://www.dehpay.com>.
 - If you have just created your Registered User account and are still on the page that says you have successfully created your account, please click the “Home” tab (see Figure 1) just above the green banner.
 - Enter your username and password here and click the “Login” button.

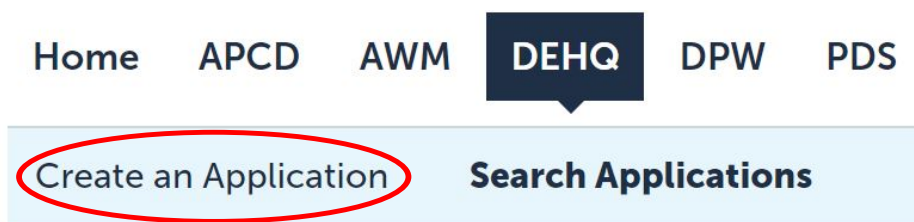


Step 2 – Create an Application:

- Click on “DEH” tab.



- Click on “Create an Application.”



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- Read through, acknowledge the General Disclaimer, and click **“Continue Application”** button.

General Disclaimer

While the County attempts to keep its Web information accurate and timely, the County neither warrants nor makes representations as to the functionality or condition of this Web site, its suitability for use, freedom from interruptions or from computer virus, or non-infringement of proprietary rights. Web materials have been compiled from a variety of sources and are subject to change without notice from the County as a result of updates and corrections.

- ☐ I have read and accepted the above terms.

Continue Application »

- Click the drop-down button next to **“FHD- Food and Housing Division”** and then select your type of submittal.

- ▼ **FHD - Food and Housing Division**
- ☐ Housing
 - ☐ New Plan Submission – Food/Mobile Food/Body Art/Massage
 - ☐ New Plan Submission – Public Pool
 - ☐ Plan Resubmittal – All Facility Types (Revision/Recheck/Blue Tag)

- Click **“Continue Application”** button.

Continue Application »

Step 3 – Complete Facility Location Data Fields:

- Enter all relevant data. The street name and zip are required fields. Then click the **“Search”** button. You can also use the **“Show Map”** feature to search for your facility. If you know all of the requested fields, then you may enter that data, skip the search, and click the **“Continue Application”** button.

Facility Location

Work Location

Street No.:	* Street Name:	Street Type:
<input type="text"/>	<input type="text"/>	--Select--
Unit Type:	Unit No.:	
--Select--	<input type="text"/>	
City:	State:	* Zip:
<input type="text"/>	--Select--	<input type="text"/>

Search

Clear

Continue Application »

- A pop-up window will appear with the search results. Click the radial button next to the address that matches your facility's location and then click the **"Select"** button.

Select

- After entering all of the facility location information or selecting location from the search, click on the **"Continue Application"** button.

Continue Application »

Step 4 – Complete Contact Information Data Fields:

- **DEH Plan Check Applicant.** If you are going to be the main contact for the submitted plans, click **"Select from Account."** If someone else is going to be the main contact for the submitted plans, then click **"Add New"** and enter their contact information.

DEH Plan Check Applicant

Fill in all required fields and any additional information.

Select from Account

Add New

Look Up

- **DEH Permit Owner.** If you are the Permit Owner for the submitted plans, click **"Select from Account."** If someone else is the Permit Owner, then click **"Add New"** and enter their contact information.

DEH Permit Owner

Fill in all required fields and any additional information.

Select from Account

Add New

Look Up

- **DEH Billing Contact.** If you are the Billing Contact for the submitted plans, click **"Select from Account."** If someone else is the Billing Contact, then click **"Add New"** and enter their contact information.

DEH Billing Contact

Fill in all required fields and any additional information.

Select from Account

Add New

Look Up

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- Review all the contact information and if correct, click the “Continue Application” button

Continue Application »

Step 5 FOOD FACILITY SUBMISSIONS – Complete Facility Details Data Fields:

*Skip to [page 15](#) for Pool Submissions

- **Detail Information.** Enter Business Name.

Detail Information

Enter Business Name

* Business Name: 

Enter your Business Name

- **Facility Information.** Select applicable options.
 - Under “Reason for Submission”
 - **New Food Facility:** This selection includes ground up construction of a permanent food facility or tenant improvement of a space that could be either a never permitted food facility or was a permitted food facility, is not anymore and there are significant changes to the structure, equipment, menu, or methods of operation.
 - **Remodel:** This selection is for current permitted food facilities making changes to the structure, equipment, menu, or methods of operation.
 - **Consult New/Change of Owner:** This selection is for new owners interested in taking ownership of a current permitted food facility, previously permitted food facility, or empty space, and would like to know what is required based on their proposed operation prior to applying for a health permit. This consultation can be done in the office or at the physical proposed location.
 - **Consultation Current Permit:** This selection is for current permitted food facilities who are interested in making some changes to the structure, equipment, menu, or method of operation and would like to know what is required based on their proposed operation prior to making these changes.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466
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- **Open Food Processing:** This selection is for any operation that involves handling of open food or beverages. This includes prepackaged from manufacture items that are then opened by an employee to either plate, pour, or further process prior to serving.
- **Prepackaged/Warehouse:** This selection is for any operation where 100% of their food and/or beverage products are prepackaged from manufacture.
- **Mobile Food Processing:** This selection is for any operation that is not in a permanent structure and involves handling of open food or beverages. This includes prepackaged from manufacture items that are then opened by an employee to either plate, pour, or further process prior to serving. These operations are from carts or trucks.
- **Mobile Food Prepackaged:** This selection is for any operation that is not in a permanent structure and 100% of their food and/or beverage products are prepackaged from manufacture. These operations are from carts or trucks.
- **Tattoo/Piercing:** This selection is for any operation that performs tattoo, piercing, permanent cosmetics and branding on a person's skin.
- **Massage:** This selection is for any operation that provides massage services as defined in San Diego County Ordinance Section 66.504.

○ Under “Total/Square Feet of Facility/Vehicle Interior”

- Enter the entire square footage of the proposed food facility or mobile food facility interior and its premises. For current permitted food facilities submitting plans for remodel, include square footage of only those areas affected by remodel.

Enter Application Details

New Facility

--Select--

Page 10 of 10

--Select--

--Select--

☐☐

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Food and Housing Division

- Under "Sewer" and "Water"

- Choose a description that best describes the sewer and water services used by your business.
- Be advised that for "Septic/Private" sewer and "Private/Well"/"Small Water System" selections approvals from the County of San Diego, Department of Environmental Health and Quality, Land and Water Quality (LWQ) Division must first be obtained prior to plan approval. Contact the LWQ duty desk at 858-565-5173 for more information.

- **Food Facility Information.** Choose a description that best describes your food facility.

Food Facility Information

FOOD FACILITY ONLY

INDICATE THE SERVICES OR TYPE OF FOOD FACILITY PROVIDED (Check all that apply)

Food Facility Type:

--Select--
--Select--
Bed and Breakfast
Boat
Catering
Commissary-For Food Prep
Commissary-For Packaged Food or Vending Machine HQ
Host Facility
Licensed Health Care
Low Risk (frozen milk products, hot dogs, beverages)
Market-Packaged
Market-Prep
Multiple Kitchen Complex Operation
Packaged Non-Potentially Hazardous Food
Restaurant/Deli
Retail Processing
Satellite Food Operation
School Food Auxiliary Facility
School-Preparation Kitchen
Wholesale Warehouse

- **Mobile Food Facility Information.** Choose a description that best describes your mobile food facility.

Mobile Food Facility

MOBILE FOOD FACILITY ONLY

MOBILE FOOD FACILITIES MUST SUBMIT COMMISSARY AGREEMENT LETTER (TOILET FACILITY LETTER IF APPLICABLE) NOTE: ALL FOOD FACILITIES INCLUDING MOBILES MUST SUBMIT MENUS WITH APPLICATION

Mobile Food Facility Type:

--Select--
--Select--
Full Food Prep
Limited Food Prep (LFP)
Mobile Support Unit
Packaged/Produce Cart/Vehicle
Single Operator Site

- **Review all the information and if correct, click the "Continue Application" button.**

Continue Application »

Department of Environmental Health & Quality

Food and Housing Division

Step 6 FOOD FACILITY SUBMISSIONS- Plans> Attach Plans:

- To help expedite the review process please **do not** upload each page of the plan as their own file. Please upload the entire plan set under **one file**, to include: menu, plans, relevant specification sheets, request for mechanical ventilation forms, common use facilities request letters, standard operating procedures, etc. Uploading multiple files will delay processing of the plan submittal package. All submitted files must be .PDF files. For Body Art or Massage facility, please select "DEH-FHD-Food-Misc Plan" for plan type.
- Click the **"Add"** button to add plans.

Attachment

Attach plans here before submitting your application.

The maximum file size allowed is 100 MB.

html;htm;mht;mhtml are disallowed file types to upload.

This application type requires you to submit the following types of documents. Subject to the collected information, you may be required to submit additional documents prior to approval.

DEH-FHD-Food-Misc Plan

Name	Type	Size	Latest Update	Action
No records found.				

Add

- Click the **"Add"** button and find your saved file in your computer and click the **"Open"** button.

File Upload

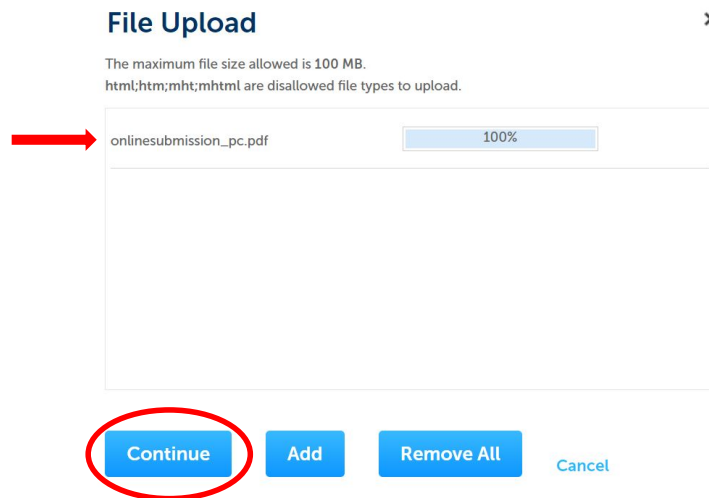
The maximum file size allowed is 100 MB.
html;htm;mht;mhtml are disallowed file types to upload.

Continue Add Remove All Cancel

Department of Environmental Health & Quality

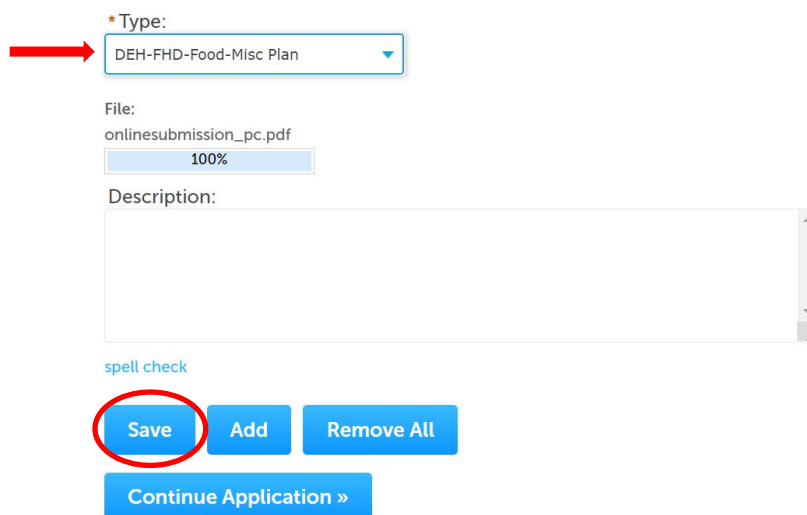
Food and Housing Division

- Verify that the file has been uploaded and then click the “Continue” button if you are ready to proceed. Otherwise, click the “Add” button again to upload more files.



The screenshot shows a 'File Upload' dialog box with a close button (X) in the top right corner. Below the title, it states: 'The maximum file size allowed is 100 MB. html;htm;mht;mhtml are disallowed file types to upload.' A table lists the uploaded file 'onlinesubmission_pc.pdf' with a progress bar at 100%. A red arrow points to the filename. At the bottom, there are four buttons: 'Continue' (circled in red), 'Add', 'Remove All', and 'Cancel'.

- Now click on the drop-down button under “**Type**” and select “**DEH-FHD-Food-Misc Plan.**” Click on the “**Save**” button. You may add a description in the description box for the uploaded file.



The screenshot shows a form for file details. At the top, there is a '* Type:' dropdown menu with 'DEH-FHD-Food-Misc Plan' selected; a red arrow points to this dropdown. Below this, the file name 'onlinesubmission_pc.pdf' is shown with a 100% progress bar. A 'Description:' text area is provided for additional information. A 'spell check' link is located below the description box. At the bottom, there are three buttons: 'Save' (circled in red), 'Add', and 'Remove All'. Below these is a 'Continue Application »' button.

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Food and Housing Division

- Verify that your uploaded document is an attachment.

Home APCD AWM **DEHQ** DPW PDS

Create an Application Search Applications



The attachment(s) has/have been successfully uploaded.
It may take a few minutes before changes are reflected.

New Plan Submission – Food/Mobile Food/Body Art/Massage

1	2 Contact Information	3 Facility Details	4 Plans	5 Review	6 Application Submitted
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Step 4: Plans > Attach Plans

To help expedite the review process please **do not** upload each page of the plan as their own file. Please upload the entire plan set under **one file**, to include: menu, plans, relevant specification sheets, request for mechanical ventilation forms, common use facilities request letters, standard operating procedures, etc. Uploading multiple files will delay processing of the plan submittal package. All submitted files must be .PDF files. For Body Art or Massage facility, please select "DEH-FHD-Food-Misc Plan" for plan type.

* indicates a required field.

Attachment

Attach plans here before submitting your application.

The maximum file size allowed is 100 MB.

html;htm;mht;mhtml are disallowed file types to upload.

This application type requires you to submit the following types of documents. Subject to the collected information, you may be required to submit additional documents prior to approval.
DEH-FHD-Food-Misc Plan

Name	Type	Size	Latest Update	Action
onlinesubmission_pc.pdf	DEH-FHD-Food-Misc Plan	1.73 MB	02/03/2022	Actions ▼

Add

Continue Application »

- Once you are done uploading files, click on the "Continue Application" button.

Continue Application »

Department of Environmental Health & Quality

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Step 7 FOOD FACILITY SUBMISSIONS– Review and Submit Application:

- Review all entered information and make any necessary changes. Click on “Continue Application” button when you are ready to submit.

[Continue Application »](#)

- Verify that the application has been successfully submitted and save a copy of the newly created Record Number. DO NOT click on the “**View Application Details**” button as an error message will respond. To check the status of your application, see the “**Check Application Status**” section of this guide.

[Home](#) [APCD](#) [AWM](#) **[DEHQ](#)** [DPW](#) [PDS](#)

[Create an Application](#) [Search Applications](#)

New Plan Submission – Food/Mobile Food/Body Art/Massage

1	2 Contact Information	3 Facility Details	4 Plans	5 Review	6 Application Submitted
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Step 6: Application Submitted



Your application has been successfully submitted.
Please print your record and retain a copy for your records.

Thank you for using our online services.

Your Record Number is DEH2022-FOAF-004157.

Choose “View Record Details” to check status or to make updates.

[View Application Details »](#)

- This record number is temporary.** To check the status of your application, you will need your assigned record number which can be found on your invoice when you receive it. The format of this record number is DEH20XX-(FFPP, FFPN, FAMD, FBAF, FMSG, Etc..)-XXXXXX.
- DEHQ Staff will reach out to you if further information is required to process your application. If the application is complete, an invoice for applicable fees and instructions on how to make a payment will be sent via email. **Please allow up to 24 hours for processing.**
- Once your plans have been reviewed and are found complete, you will receive an email notifying you the fees due. You will be provided a new record number and will be advised to pay the fees due using the new record number.

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- Once a payment has been made, provide notification of payment to FHDPlanCheck.LUEG@sdcounty.ca.gov. **Plan Check staff will not begin to review your plans until payment is received.**
- Upon confirmation of payment, your plans will be reviewed in the order it was received. Plans will be reviewed within 20 business days.
- If you have checked the box for express plan review, please note that your request is not guaranteed and is subject to the availability of staff and paid additional fees.

Step 5 POOL FACILITY SUBMISSIONS – Complete Facility Details Data Fields:

- **Detail Information.** Enter Business Name.

Detail Information

Enter Business Name

* Business Name: 

Enter your Business Name

- **Scope of Work.** Click “Add a Row” and enter all relevant details in pop-up. Click “Submit” button when complete. Repeat process for each body of water or you may select the drop down and select the total number of bodies of water for this plan submission. Missing data may slow down processing and review time.

SCOPE OF WORK

Identify all proposed changes in the table below. Add a new row for each body of water.

Showing 0-0 of 0

Body Of Water	Location Description	New body of water or spray ground	Structural remodel	Plumbing remodel	Renovation of restrooms or showers	Splitting of main drains/suction outlets	Addition of a solar heating system	Resurface	Renovation of enclosure/fencing	Decking
---------------	----------------------	-----------------------------------	--------------------	------------------	------------------------------------	--	------------------------------------	-----------	---------------------------------	---------

No records found.



Add a Row 

Edit Selected

Delete Selected

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SCOPE OF WORK

Identify all proposed changes in the table below. Add a new row for each body of water.

*Body Of Water:

Pool

*Location Description:

Middle of apartment comp

☒ New body of water or spray ground

☐ Structural remodel

☐ Plumbing remodel

☐ Renovation of restrooms or showers

☐ Splitting of main drains/suction outlets

☐ Addition of a solar heating system

☐ Resurface

☐ Renovation of enclosure/fencing

☐ Decking

☐ Equipment Change

Other (Describe):

[spell check](#)

Submit

[Cancel](#)

- Equipment Details.** Click "Add a Row" and enter all relevant details in pop-up. Click "Submit" button when complete. Repeat process for each body of water or you may select the drop down and select the total number of bodies of water for this plan submission. Missing data may slow down processing and review time.

EQUIPMENT DETAILS

Identify all new and existing equipment in the table below. Add a new row for equipment of each body of water.

*Body Of Water:

--Select--

Existing Filter Make/Model: ?

New Filter Make/Model:

*Location Description:

Where on the property?

[spell check](#)

Existing Filter Type:

--Select--

[spell check](#)

New Filter Type:

--Select--

[spell check](#)

*Volume (gallons):

Cubic Feet

Existing Pump Make/Model: ?

New Pump Make/Model: ?

Pool Shape:

--Select--

[spell check](#)

Existing Pump Type:

--Select--

[spell check](#)

New Pump Type:

--Select--

Year Built:

Existing Disinfectant Make/Model:

New Disinfectant Make/Model:

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Food and Housing Division

- Review all entered information and make any necessary changes. Click on “**Continue Application**” button.

[Continue Application »](#)

Step 6 POOL FACILITY SUBMISSIONS – Complete Ancillary Facility Data Fields:

- Sanitary Facilities.** Click “Add a Row” and enter all relevant details in pop-up. Click “Submit” button when complete. Repeat process for each restroom type or you may select the drop down and select the total number of restrooms for this plan submission. The total number of showers and drinking fountains only need to be on one line entry. Missing data may slow down processing and review time.

New Construction or Remodel of an Ancillary Facility

SANITARY FACILITIES

Identify all proposed changes in the table below. Add a new row for each portion of the remodeled ancillary facility (e.g.; men’s restroom, women’s restroom, showers, etc.).

Showing 0-0 of 0

Sanitary Facility Type	Location Description	Number of Toilets	Number of Urinals	Number of Sinks	Number of Showers	Number of Drinking Fountains
No records found.						
<div>Add a Row Edit Selected Delete Selected</div>						

SANITARY FACILITIES

Identify all proposed changes in the table below. Add a new row for each portion of the remodeled ancillary facility (e.g.; men’s restroom, women’s restroom, showers, etc.).

* Sanitary Facility Type:

* Location Description:

Number of Toilets:

* Number of Urinals:

Number of Sinks:

Number of Showers:

Number of Drinking Fountains:

[Submit](#)

[Cancel](#)

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- **Site Description.** Enter required data. For express review, select the appropriate checkbox.

Site Description

APPLICATION DETAILS

Complete the fields below. The fields with a red asterisk (*) are required.

* Proposed Construction Start Date: <input type="text"/>	* Projected Construction Completion Date: <input type="text"/>
Existing Facility Permit Number: <input type="text" value="Enter health permit numb."/>	* Total # of Bodies of Water: <input type="text"/>
Resort/Entertainment Complex Name: <input type="text" value="Enter resort/complex nam"/>	Organized Camp Name: <input type="text" value="Enter organized camp nar"/>
I would like to request an express review of plans. I understand this service is not guaranteed and is subject to staff availability. I also understand that this service requires additional fees and I will be assessed these fees after available staff accepts this review: <input type="checkbox"/>	

- Review all entered information and make any necessary changes if needed. Click on “Continue Application” button.

Continue Application »

Step 7 POOL FACILITY SUBMISSIONS- Attach Plans:

- To help expedite the review process please **do not** upload each page of the plan as their own file. Please upload the entire plan set under **one file**, to include: plans, relevant specification sheets, any standard operating procedures, any special requests, any lifeguard plans, etc. All submitted files must be .PDF files.
- Click the “Add” button to add plans.

Attachment

When uploading plans and specifications, please enter Today's date for Document Date and the Current year for Year.

The maximum file size allowed is 100 MB.

html;htm;mht;mhtml are disallowed file types to upload.

This application type requires you to submit the following types of documents. Subject to the collected information, you may be required to submit additional documents prior to approval.

DEH-FHD-Pool Plan

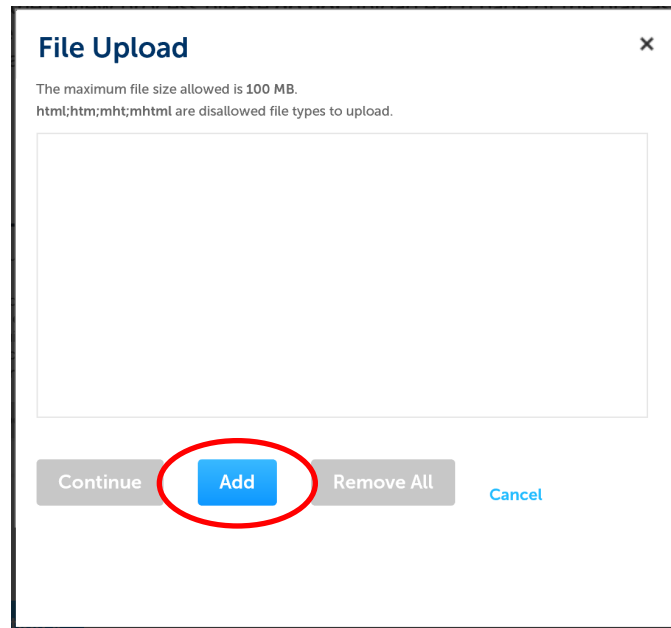
Name	Type	Size	Latest Update	Action
No records found.				

Add

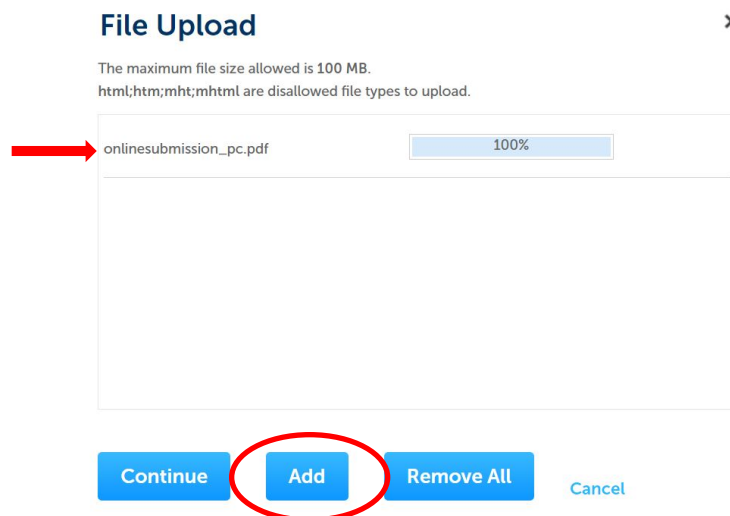
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- Click the **“Add”** button and find your saved file in your computer and click the **“Open”** button.



- Verify that the file has been uploaded and then click the **“Continue”** button if you are ready to proceed. Otherwise, click the **“Add”** button again to upload more files.



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- Now click on the drop-down button under “**Type**” and select “**DEH-FHD-Pool Plan.**” Click on the “**Save**” button. You may add a description in the description box for the uploaded file.

*Type: DEH-FHD-Pool Plan

File:
onlinesubmission_pc.pdf
100%

Description:

spell check

Save **Add** **Remove All**

Continue Application »

- Verify that your uploaded document is an attachment.

Home APCD AWM **DEHQ** DPW PDS

Create an Application Search Applications

The attachment(s) has/have been successfully uploaded.
It may take a few minutes before changes are reflected.

New Plan Submission – Food/Mobile Food/Body Art/Massage

1	2 Contact Information	3 Facility Details	4 Plans	5 Review	6 Application Submitted
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Attachment

Attach plans here before submitting your application.

The maximum file size allowed is 100 MB.
html;htm;mht;mhtml are disallowed file types to upload.
This application type requires you to submit the following types of documents. Subject to the collected information, you may be required to submit additional documents prior to approval.
DEH-FHD-Food-Misc Plan

Name	Type	Size	Latest Update	Action
onlinesubmission_pc.pdf	DEH-FHD-Food-Misc Plan	1.73 MB	02/03/2022	Actions ▼

Add

Continue Application »

- If you are done adding files, click on the “**Continue Application**” button.

Continue Application »

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Step 8 POOL FACILITY SUBMISSIONS– Review and Submit Application:

- Review all entered information and make any necessary changes. Click on “Continue Application” button if you are ready to submit.

[Continue Application »](#)

- Verify that the application has been successfully submitted and save a copy of the newly created Record Number. DO NOT click on the “**View Application Details**” button as an error message will respond. To check the status of your application, see the “**Check Application Status**” section of this guide.

[Home](#) [APCD](#) [AWM](#) **[DEHQ](#)** [DPW](#) [PDS](#)

[Create an Application](#) [Search Applications](#)

New Plan Submission – Public Pool

1	2 Contact Information	3 Facility Details	4 Plans	5 Review	6 Application Submitted
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Step 6: Application Submitted



Your application has been successfully submitted.
Please print your record and retain a copy for your records.

Thank you for submitting your pool plans!

Your Record Number is DEH2022-FOAP-000622.

Choose “View Record Details” to check status or to make updates.

[View Application Details »](#)

- This record number is temporary.** To check the status of your application, you will need your assigned record number which can be found on your invoice when you receive it. The format of this record number is DEH20XX-FPOOL-XXXXXX.
- DEHQ Staff will reach out to you if further information is required to process your application. If the application is complete, an invoice for applicable fees and instructions on how to make a payment will be sent via email. **Please allow up to 24 hours for processing.**
- Once your plans have been reviewed and are found complete, you will receive an email notifying you the fees due. You will be provided a new record number and will be advised to pay the fees due using the new record number.
- Once a payment has been made, provide notification of payment to FHDPlanCheck.LUEG@sdcounty.ca.gov. Plan Check staff will not begin to review your plans until payment is received.

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Food and Housing Division

- Upon confirmation of payment, your plans will be reviewed in the order it was received. Plans will be reviewed within 20 business days.
- If you have checked the box for express plan review, please note that your request is not guaranteed and is subject to the availability of staff and paid additional fees.

Checking Application Status:

Once your application has been processed and a record number has been created by Plan Check staff, you can check the status of your application at any time by going to the ACA home page (<https://dehpay.com/>) and clicking “**Search Applications**” in the DEH section. Enter your updated Record ID (not the FOAF, FOAR, or FOAP records) in the **Record Number** field and click **Search**. Ensure the Record ID entered is the same as the one received to make fee payments.

DEH

[Create an Application](#)

[Search Applications](#)

Once the record is displayed you can check the status by clicking “Record Info” and then clicking “**Processing Status**” option. You can click on each status for more detailed information.

Processing Status

✓ ▶	Application Review
✓ ▶	Distribute Plan Check Package
⌚ ▶	Plan Check Review
	Pre-Issuance Inspection
	Issue
	Inspection
	Renewal
	Completed

Please make note of the following statuses and their meanings:

- Application Review – The application is being reviewed for completeness and invoice sent to the DEH Billing Contact for payment or the plans were disapproved and returned to the applicant for corrections. If sent back for corrections, the record status will be “Out to Applicant”.
- Plan Check Review – The plans are being reviewed by the DEH Environmental Health Specialist.
- Inspection – The plans have been approved and the operator must schedule the required field construction inspections. Typically, a new or major remodel of a food facility will require a minimum of 2 inspections: 50-80% complete and 100% complete. Call the scheduling line (858) 505-6660 at least (10) business days in advance to schedule your field inspections.

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Resubmitting Plans for Review:

If the plans have been disapproved or need minor corrections, a message will be emailed to the **Applicant and the Owner** detailing the corrections to be made. The corrected plans must be resubmitted electronically in ACA. Also, if you are revising the plans from what was originally submitted, then this submission must also be done electronically in ACA. Follow steps [one](#) and [two](#) listed above. At step two, select “FHD” in the dropdown field, then select “Plan Resubmittal- All Facility Types (Revision/Recheck/Blue Tag)”.

- Click on the “Select from Account” button.

Plan Resubmittal – All Facility Types (Revision/Recheck/Blue Tag)

1 Contact Information	2 Facility Details	3 Resubmittal	4 Review	5 Application Submitted
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Step 1: Contact Information > Applicant Details

* indicates a required field.

DEH Plan Check Applicant

Fill in all required fields and any additional information.

Select from Account

Add New

Look Up

Continue Application »

- Verify that the contact was added successfully then Click on the “Continue Application” button.

DEH Plan Check Applicant

Fill in all required fields and any additional information.



✓ Contact added successfully.

Test

Home phone:

Mobile Phone:

Work Phone:

Fax:

[Edit](#) [Remove](#)



Continue Application »

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- Provide business name as it was originally submitted, then enter the final Record ID that was provided to you in an email for paying fees within the **“Record/Project Number”** field. Click on the **“Continue Application”** button.

Step 2: Facility Details > Site Information

* indicates a required field.

Detail Information

* Business Name: 

ASI

APPLICATION DETAILS

For Record/Project Number, please use the full DEH Record ID, e.g., DEH2017-FFPP-012345, DEH2017-FAMD-654321, etc.

* Record/Project Number:

I would like to request an express review of plans. I understand this service is not guaranteed and is subject to staff availability. I also understand that this service requires additional fees and I will be assessed these fees after available staff accepts this review:

☐

Address/Location:

[spell check](#)

[Continue Application »](#)

- To help expedite the recheck or blue tag process, please only upload the pages that have been corrected or altered as **one PDF file**. Please delta, cloud, or otherwise mark the changed to the original PDF pages and include information of where each correction has been updated. Do not resubmit full sets of plans, unless every page has been altered. Uploading multiple files will delay processing of the plan submittal package. All submitted files must be .PDF files. For Body Art and Massage facility, please select "DEH-FHD-Food-Misc Plan" for plan type.
- Click the **“Add”** button to add plans.

Attachment

When uploading plans and specifications, please enter Today's date for Document Date and the Current year for Year.

The maximum file size allowed is 100 MB.

html;htm;mht;mhtml are disallowed file types to upload.

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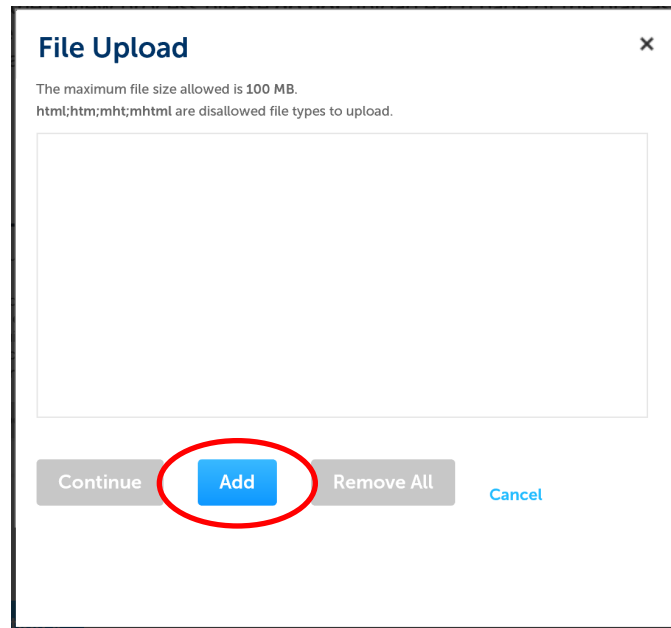
Name	Type	Size	Latest Update	Action
No records found.				

[Add](#)

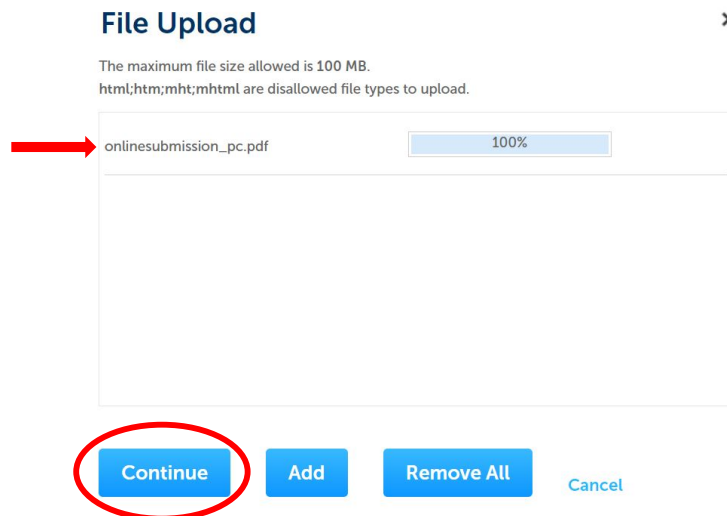
Department of Environmental Health & Quality

Food and Housing Division

- Click the **“Add”** button and find your saved file in your computer and click the **“Open”** button.



- Verify that the file has been uploaded and then click the **“Continue”** button if you are ready to proceed. Otherwise, click the **“Add”** button again to upload more files.



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- Now click on the drop-down button under “**Type**” and select the affiliated type. Click on the “**Save**” button. You may add a description in the description box for the uploaded file.

* Type: DEH-FHD-Food-Misc Plan ▼

File:
onlinesubmission_pc.pdf
100%

Description:

[spell check](#)


Save **Add** **Remove All**

Continue Application »

- Verify that your uploaded document is an attachment.

Home APCD AWM **DEHQ** DPW PDS

Create an Application Search Applications

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New Plan Submission – Food/Mobile Food/Body Art/Massage

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Name	Type	Size	Latest Update	Action
 onlinesubmission_pc.pdf	DEH-FHD-Food-Misc Plan	1.73 MB	02/03/2022	Actions ▼

Add

Continue Application »

Department of Environmental Health & Quality

Food and Housing Division

- If you are done adding files, click on the **“Continue Application”** button.

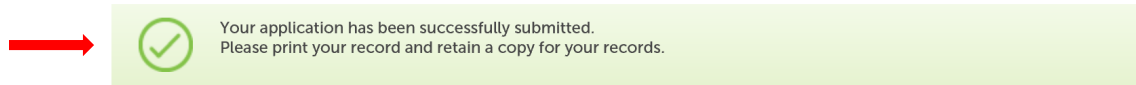
Continue Application »

- Review the application and click on the **“Continue Application”** button.
- Verify that the application has been successfully submitted and save a copy of the newly created Record Number.

Plan Resubmittal – All Facility Types (Revision/Recheck/Blue Tag)

1 Contact Information	2 Facility Details	3 Resubmittal	4 Review	5 Application Submitted
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Step 5: Application Submitted



Thank you for using our online services.

Your Record Number is DEH2021-FOAR-002092.

- This record number is temporary.** To check the status of your application, you will need your assigned record number which can be found on your invoice when you receive it. The format of this record number is DEH20XX-(FFPP, FFPN, FAMD, FPOOL, FBAF, FMSG, Etc..)-XXXXXX.
- DEHQ Staff will reach out to you if further information is required to process your application. If the application is complete, an invoice for applicable fees and instructions on how to make a payment will be sent via email. **Please allow up to 24 hours for processing.**
- Once your plans have been reviewed and are found complete, you will receive an email notifying you the fees due. You will be provided a new record number and will be advised to pay the fees due using the new record number.
- Once a payment has been made, provide notification of payment to FHDPlanCheck.LUEG@sdcounty.ca.gov. Plan Check staff will not begin to review your plans until payment is received.
- Upon confirmation of payment, your plans will be reviewed in the order it was received. Plans will be reviewed within 20 business days.
- If you have checked the box for express plan review, please note that your request is not guaranteed and is subject to the availability of staff and paid additional fees.

Note:

- Only the registered user who submitted the application can upload additional documents/plans.

Contact Us:

If you have questions about the digital plan submission process or general plan check questions, please contact us using our [inquiry form](#).