



# County of San Diego

DEPARTMENT OF ENVIRONMENTAL HEALTH & QUALITY  
FOOD AND HOUSING DIVISION

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Plan Check Scheduling Line: (858) 505-6660



## Retail Processing Standard Operating Procedures

This document is for those Retail Food Processing Facilities, as defined below, that operate out of a shared kitchen or commissary kitchen. This document will help you prepare the required written description of your proposed retail activities, including descriptions of your equipment and standard operating procedures for your proposed retail business. All required documents will be reviewed during the Plan Check Review process. Once these procedures are approved, a Plan Check Field Consultation will be required for an onsite evaluation at the proposed commissary location. A signed and APPROVED copy of this document must be maintained with your retail operation during all operating hours.

*Definition: Retail Food Processing Facility permit is defined as "any food operation as defined in the CRFC that has no on-site indoor or outdoor dining and processes and packages food for retail sales for delivery, pickup, or takeout only."*

*Examples of this type of operation include but are not limited to the following:*

- Facilities operating from shared permitted kitchens that produce for pre-ordered individual retail sales for delivery, pick-up, or takeout only.
- Facilities that process and package food for retail sales that may also have processed food registrations/licenses with the California Department of Public Health, California Department of Food and Agriculture, United States Department of Food and Agriculture.
- Facilities offering prepared foods that may require additional preparation or cooking.

*NOTE: A Retail Food Processor may conduct Catering Operations without an additional permit. A Retail Food Processor will NOT have a prepackaged retail sales floor. A facility with a sales floor is under a different permit category. A Retail Food Processor that desires to build out their own facility or operates their own facility do not qualify for this procedure review. This is only for those working out of a shared kitchen.*

Please note that any changes to the menu, equipment, or procedures listed on your approved form will require another review and written approval by the Department of Environmental Health & Quality's Food and Housing Division (DEHQ-FHD).

DBA Name: \_\_\_\_\_ Health Permit #: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Documents to Include

✓	<b>Check the following items as you include them with this document.</b>
<input type="checkbox"/>	<b>Application</b> - Complete and submit the <a href="#">plan check application for an in-office Plan Check Consultation</a> . Once the proposed Standard Operating Procedures have been approved, a Plan Check Field Consultation is required to obtain a health permit. Separate fees apply for both consultations. Ensure that all information is legible.
<input type="checkbox"/>	<b>Commissary Agreement</b> - The operator must prepare and store all food and equipment at a commissary kitchen (permitted food facility). The operator and their proposed commissary must complete and sign the <a href="#">commissary agreement</a> . <b>**This requirement is for permitted or proposed shared kitchen facility spaces.</b>

<input type="checkbox"/>	<b>Menu</b> - Include all menus. List all food and beverages items to be sold. (Refer to page 3 & 7)
<input type="checkbox"/>	<b>Food Safety Manager Certification</b> - Provide proof that an owner or employee has a valid <a href="#">Food Safety Manager</a> certificate or card.
<input type="checkbox"/>	<b>County Food Handler Card</b> - Provide documentation that all employees have a valid <a href="#">County of San Diego Food Handler Card</a> .

## Retail Processing Process

**1. Provide a brief description on how you intend to provide the food to customers. For example, is the food to be prepared on site for pick up by customer or is the food to be delivered by facility or third-party delivery companies. If food is to be picked up by customers, describe how the food will be provided to the customer with the customer entering the kitchen or food preparation area.**

**Note: Customers are not allowed to enter the food preparation areas.**



**Food Production**

1. Indicate the location where you will store food and equipment during and after the retail process.

Commissary Name: \_\_\_\_\_ DEHQ-FHD Permit #: \_\_\_\_\_

Address: \_\_\_\_\_

Below, please describe your menu.

<b>MENU DESCRIPTION</b> <small>(USE ADDITIONAL SHEET ON PAGE 5, IF NECESSARY)</small>
Indicate all the food and beverage items that will be provided by this operation.
FOOD ITEM

2. List equipment and utensils that will be used and whether the equipment is part of the commissary or is new additional strucly for the retail processing. Please be specific on equipment’s use and function.  
For example: Equipment: Blender Intended use: Make Smoothies

Equipment	Intended use during food preparation	Existing of Commissary	New Addition
Refrigerator			

3. **Transport and Storage-** Describe the procedures for transportation (more than 30 minutes) and storage of food and equipment. Include methods to cold-hold and hot-hold potentially hazardous foods and the methods to hold food until delivery. Please note that all potential hazardous foods not held at 41°F or below during operation shall be discarded at the end of service. (See below for third party delivery services)

**Note:** The following are standard requirements for all transport vehicles.

- Transport Vehicle**
- Interior is constructed of smooth, washable, impervious material.
  - Holding area does not drain liquid to street, sidewalk, or premises.

<b>Hot Holding Method</b> (135°F and above)	During Transport-
<b>Cold Holding Method</b> (41°F and below)	During Transport-
<b>Other Food Storage</b>	During Transport-
<b>Closing Procedures</b>	Food Disposal-

**Third-Party Delivery:**

If food is to be delivered by a third-party service, please describe the food staging area:

**4. Cleaning- Describe the procedures you will use to clean and sanitize food contact surfaces, equipment, and utensils at the commissary.**

Indicate the specific sanitizer or sanitizing method that you will use by checking the box below:

Contact with a solution of 100 ppm (parts per million) available chlorine for at least 30 seconds.

Contact with a solution of 200 ppm available quaternary ammonium for at least one minute.

Check the option you will use:  Commercial pre-mixed solution or  I will prepare my own sanitizer solution

Statements		
Initial next to the below statements indicating that you understand and will abide by them.		
_____	<b>1</b>	<b>A Retail permit may be used to prepare and serve food directly to customer or by delivery.</b>
_____	<b>2</b>	<b>All food must be prepared at the approved commissary. Home preparation or storage of food is prohibited.</b>
_____	<b>3</b>	<b>A plan check fee must be paid prior to each consultative appointment and an operational health permit for a Retail Processing Facility (FA08) must be applied and paid for prior to operating.</b>
_____	<b>4</b>	<b>Upon request, you must provide your operation schedule to DEH for inspection purposes.</b>
_____	<b>5</b>	<b>For Retail Processing Facilities that also conduct catering operations, all multi-use utensils will be washed and sanitized at the approved commissary at the end of the operational period.</b>

**Acknowledgment**

I understand and agree that if I make changes to my operating procedures, I must notify the DEH-FHD within 7 days. Revised operating procedures may be provided by Fax: 858-505-6848, E-mail: [fhdpermits@sdcounty.ca.gov](mailto:fhdpermits@sdcounty.ca.gov), in person at 5500 Overland Avenue, San Diego, CA 92123 or by U.S. Mail to P.O. Box 129261, San Diego, CA 92112-9261, Attn: DEHQ-FHD plan Check Program. Failure to notify DEH-FHD of any changes may result in an administrative citation, suspension, or revocation of the Health Permit issued to me to operate as a Retail Processing Facility. Ensure approvals are obtained from all applicable agencies prior to operation (e.g., fire, zoning, etc.).

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

<b>Additional Menu Description</b>
Indicate all the food and beverage items that will be provided by this operation.
<b>FOOD ITEM</b>