

Environmental Health Division

Serving Crawford, Kalkaska, Lake, Manistee, Mason, Mecosta, Missaukee, Newaygo, Oceana, and Wexford Counties

Restaurant Ownership Change Form

Please provide all requested information as completely and accurately as possible. An Environmental Health Sanitarian will review the completed form to determine if the existing restaurant (equipment, amount of refrigeration, hot water capacity, storage space, hand wash facilities, etc.) can accommodate the proposed new restaurant and/or changes.

Note:

- A <u>Plan Review</u> may be required. A determination will be made after consultation and/or review of the establishment's file.
- The local township and/or building department may also need to be contacted for approval to open.
- A <u>Pre-opening Inspection</u> will be required prior to opening. You will be contacted by an Environmental Health Sanitarian to schedule this inspection.

Restaurant Information				
Current Restaurant Name				
Proposed Restaurant Name				
Street Address		City		Zip
Proposed Open Date	Water Supply	Munici	pal Well	
New Owner		<u>, </u>		
Name		Phone		
Email				
Planned Changes (attach additional pages as necessary)				
<u>Menu</u>				
Building				
<u>Equipment</u>				
Office Use Only			Receipt	
·	SOP's			
Manager Certification Certificates	Type II Well Ownership For	/ell Ownership Form - if applicable		