

Montana Department of Public Health & Human Services Food & Consumer Safety Section

PUBLIC SLEEPING ACCOMMODATION PLAN REVIEW

[Based on ARM Title 37, Chapter 111, Subchapter 1; Document date 20130404]

Note: This checklist applies to hotels, motels, tourist homes (vacation rentals), rooming houses, and boarding houses (hostels). This checklist DOES NOT apply to bed & breakfasts, guest ranches, and outfitting & guide facilities as defined in 50-51-102, MCA.

Please submit this completed checklist and all applicable documents to the local county sanitarian (i.e. environmental health office).

Licensee (Owner) Name			
Contact Phone 1	Phone 2	Email	
Establishment Name			
		County	
Mailing Address (If different fro	om above)		
City	State	Zip	
Contact Phone 1	Pnone 2	Email	
Engineer/Architect/Designer I	Name		
Business Name			
Business Mailing Address			
	State		
Contact Phone 1	Phone 2	Email	

Sanitarian approval of these plans must be obtained before any construction or remodeling begins, or a home or other building is converted into a public sleeping accommodation. Plan review may or may not be waived for a change of ownership, but final approval is needed from the sanitarian.

Inspection and approval to open by the local sanitarian must be obtained before a license can be issued. Submit license fee (payable to DPHHS) to local sanitarian once the license is approved. DO NOT send the fee in with this application. The fee is \$40 for 1 to 10 rooms, \$80 for 11 to 25 rooms, \$160 for 26 or more rooms.

If the establishment qualifies as a public water supply, public wastewater system, or subdivision, plans must be submitted to the Department of Environmental Quality (DEQ) and the local sanitarian in accordance with the subdivision requirements in ARM Title 17, Chapter 36, subchapter 3 and public water supply requirements in ARM Title 17, Chapter 38, subchapter 1, as applicable.

The local sanitarian will make approval or disapproval known to the applicant within 30 business days from when a complete plan is submitted. This deadline may be extended to 120 days or later if an environmental health impact statement is required, as determined by DEQ. Any approval of plans expires in 2 years if construction has not begun.

Please complete all questions on pages 1 through 7. If a question does not apply to your establishment, then place a "NA" (not applicable) next to the item. Note: this checklist does not contain all the requirements of ARM Title 37, Chapter 111, subchapter 1.

Reason for Review Choose 1 of the 4 options.
☐ 1. New License with New Construction
2. New License with Existing Building (Conversion to a Public Sleeping Accommodation)
3. Remodel, Alteration, Enlargement of Licensed Public Sleeping Accommodation
☐ 4. Ownership/Licensee Change
> If previously licensed, former business name
Previous owner/licensee name
Previous license number Last calendar year licensed
Type of Establishment Check all that apply. Include numbers proposed and existing if applicable.
1. Hotel or Motel: Number of bedrooms
2. Tourist Home, Vacation Rental: Number of buildings, houses, cabins, and condos
Total number of bedrooms
☐ 3. Boarding House, Hostel: Number of bedrooms
GENERAL PLAN REVIEW REQUIREMENTS With this application, please submit the following:
☐ Detailed plans showing any laundry facility, laundry room handwashing sink, janitor sink, cleaning supply storage, bedding storage, extra furnishing storage and ice machines (not part of a guest room individual freezer unit). Include the location of swimming pools, spas, and other recreational water features. Scaled plans or measurements are not necessary, but may be used if available.
☐ Detailed plans showing all food preparation, storage, dishwashing and service areas, unless already licensed as a retail food service establishment under 50-50-102, MCA. See page X for more information.
A flow chart showing the route of laundry through sorting, washing, drying, ironing, folding, and storage. Using a different color for each step is helpful.
WATER SUPPLY Choose 1 of the following 4 options.
1. The establishment will be connecting to an existing public water supply, PWSID # Note: Connection plans may need to be reviewed and approved by DEQ.
2. A public water supply will be developed and used. "Public water supply system" means a water supply that has at least 15 service connections or that regularly serves at least 25 persons daily for any 60 or more days in a calendar year. Plans must be reviewed and approved by DEO. Pefor to APM Title 17. Chapter 38, subchapters 1, 2, 3, and 5.

	A newly constructed nonpublic water supply 2 for construction and maintenance standa	y system will be used. Refer to FCS Circular 1-
cons	An existing nonpublic water supply system structed after May 2012, modifications are essary, compliance with FCS Circular 1-20	made, or the local sanitarian determines it is
FOR NONPL	UBLIC WATER SUPPLY ONLY -SAMPLING	
	nonpublic water supply systems, satisfactors the system may be used as a potable w	•
	Coliform test date	
	Nitrate test date	
•		wice a year (April through June and again July ne local sanitarian. Nitrate tests are taken every
FOR NONPO	OTABLE WATER SOURCES ONLY	
☐ A no	onpotable water source will be used for	,
whic	ch does not expose the public to any health	n risk.
Į	Points of access are marked "not for hu	man consumption".
Į	☐ No possible connection to a potable wa	ter supply exists.
WASTEWAT	TER SYSTEM Choose 1 of the following 4 op	otions:
DEC	_	existing public wastewater system, city name or on plans may need to be reviewed and approved mit may also be required.
mea leas		ped and used. "Public wastewater system" service connections or that regularly serves at in a calendar year. Plans must be reviewed
	A newly constructed nonpublic wastewater ulations, permit #	system will be used. The system meets local Refer to 50-2-116, MCA.
	An existing nonpublic wastewater system wmit #	vill be used. The system meets local regulations, Refer to 50-2-116, MCA.
Solid Was	STE STORAGE	
	bage containers are stable, rodent-proof, a	and protected from deterioration (if metal).
_	bage storage is adequate and prevents an	
_		lids which prevent flies and water from entering.
	,	

OLID WASTE F	REMOVAL Choo	ose 1 of the follo	wing 2 options:		
☐ 1. Garb	age is picked ı	up by a contracte	ed service. Compan	y name	·
	=	=	ed solid waste facilit		ent management.
noose 1 of th	ne following 2 d	options:			
☐ 1. Garba	age is remove	d at least weekly	'.		
☐ 2. A de\	viation from we	eekly removal is	requested. Describe	how the proper	ty manager will
		-	Il of solid waste will r		_
		аа а			<u> </u>
IYSICAL REQU	JIREMENTS AND	CLEANING DETA	ILS		
☐ All furni	shings, fixture:	s, floors, walls, a	nd ceilings are clear	and in good rep	oair.
	•	s for maintenance	· ·	5 .	
_	•		cleanable finish mate	erials and ventila	ation will be
	•	•	v or attach informatio		
<u> </u>	Flooring	Walls	Floor-Wall	Ceiling	Ventilation
			Baseboard		
Guest					
Room					
Bathrooms					
Public					
Bathrooms					
Laundry					
Room					
Janitor					Not required
Sink Area					
	<u> </u>	L			<u> </u>
■ Bathtub	s and showers	s are provided wi	th a built-in anti-slip	surface.	
_	s and showers	s are provided wi	th removable anti-sli	p mats.	
		•	urnishinas is sufficie	•	

	Cleaning compounds and pesticides are stored, used, and disposed according to manufacturer's label instructions.
	Janitorial storage facilities are adequate and convenient.
	Janitor sink is available, with the following backflow prevention
	The facility is a tourist home, and a deviation from having a janitor sink is requested.
	> Describe how cleaning equipment will be washed without a janitor sink
	➤ Describe how mop water will be disposed without a janitor sink
	Mops are air dried between uses.
	Toilet and urinal cleaning devices are separated from other cleaning supplies and not used for any other purpose.
	Bathtub and shower cleaning devices are separated from other cleaning supplies and not used for any other purpose.
	Ozone air purifiers are not used within the establishment. Note: Alternative methods of air cleaning can be used such as elimination of the pollution source, ventilation, or air filtration.
	All rooms, hallways, stairways, and public access areas are provided with sufficient light.
	Water provided at laundry room and guest room handsinks, bathtubs, and showers is mixing
	hot and cold, at least 100°F, but not more than 120°F. Temperature recorded
	Location temperature taken
	Property is maintained to minimize insects, rodents and other vermin. Describe cleaning
	schedule and pest control
LAUNE	DRY FACILITY Choose one of the following three options:
	1. Laundry is done on-site.
	2. Laundry is taken to an off-site facility. Name and location of facility:
	Laundry is picked up by a contracted service. Name of service:
LAUNE	DRY PROCESS
	Bedding, towels, and other laundered items are mechanically washed.
	Wash cycle is long enough and enough detergent is used to thoroughly remove all visible soil.
	Laundered items are hot air tumble dried to at least 130°F for at least 10 minutes.

		Carts or other containers are labeled to separate clean and dirty items.
		Hands are washed between touching dirty and clean laundry.
		Laundry area has a handwashing sink with soap, paper towels and trash can.
		If handwashing sink is used for soaking laundry, explain how it will be available for handwashing when needed:
Gu	EST	ROOM CLEANING & MAINTENANCE
		Guest rooms are cleaned and supplied with freshly laundered sheets, pillow covers, towels and washcloths before each new guest or group of guests arrive.
		Clean bed sheets, pillow covers, towels and washcloths are provided to each guest at least weekly.
		☐ Guests may request more frequent service.
		☐ This establishment has a policy more for frequent service than weekly. Describe:
		If bathrooms are shared, they are cleaned daily.
		All bedding, towels, and washcloths provided by management are in good repair.
		Each mattress is covered with a machine-washable pad.
		Sheets adequately cover the bed and fold over the blanket at least six inches.
		All bedding including quilts and comforters are machine-washable or covered with machine-washable linen such as a duvet.
		Items provided in the guest room and at other locations such as glassware, pitchers, ice
		buckets, coffee pots and other utensils used for food or drink are washed, rinsed, and sanitized
		with 50 ppm chlorine solution or . Describe how this is
		done
		The following single-service items are provided
		All utensils used for food or drink provided for guests are stored, handled, and dispensed in a manner which prevents contamination.
ICE	С	hoose all that apply:
		Ice is made from the establishment's water supply.
		Ice is obtained from a licensed approved vendor.
		Ice is made, stored, handled, and transported in a clean manner that prevents contamination.
		Ice machine drain(s) are air-gapped to wastewater system.
		Ice is made and stored in an automatic dispenser.
		Ice is served by the establishment's staff with a clean ice scoop that is kept clean at all times.

FOOD SERVICE		
☐ Food and ➤ Compli	beverages are provided to over- ance with ARM Title 37, Chapte is required.	night guests and staff only. r 110, subchapter 2 applies, but no separate food
🗖 Арр	licant has a copy of the rules.	
mar ceili han	nufacturer name and model numings, and a diagram showing the dwashing sink(s), food storage a	nitted, including the menu, equipment list with ber, finish surface materials for floors, walls and location of all the food service equipment, area(s), mop sink, restroom(s), dishwashing sinks ttal date:
event parti Lice	cipants, who are not overnight g ensing under ARM Title 37, Chap	oter 110, subchapter 2 applies.
□ Foo	od service is currently licensed.	_icense number
mar ceili han	nufacturer name and model num ings, and a diagram showing the dwashing sink(s), food storage a	hitted, including the menu, equipment list with ber, finish surface materials for floors, walls and location of all the food service equipment, area(s), mop sink, restroom(s), dishwashing sinks tall date:
GUEST REGISTRAT	TION	
and unit to		or with the name of the guest, contact information, for communicable disease investigations or other
LICENSE REQUIRE	MENT AND DISPLAY	
transferable new license	 This means if you sell your busing. If you move to a new location, yourself in the structures, you must come and the structures. 	be displayed in a visible location. The license is not ess to another person, the new owner must apply for a u must apply for a new license. If you add any guest ntact the local health authority for a review and approval
from satisfy may include inspection,	ring applicable requirements from o e, but are not limited to the following	he local health authority does not relieve the applicant ther federal, state, or local agencies. Other requirements business licensing, building code permit and food licensing, public swimming pool, spa, and other
plans as su		orrect. I fully understand that any deviation from the om the health authority may nullify any approval from the
ATTEST		
Applicant S	Signature	Date