



# County of Riverside DEPARTMENT OF ENVIRONMENTAL HEALTH

www.rivcoeh.org

Department of Environmental Health  
P.O. Box 7909  
Riverside, CA 92513-7909

District # \_\_\_\_\_

PR# \_\_\_\_\_

PE# \_\_\_\_\_

SR# \_\_\_\_\_

OCR# \_\_\_\_\_

## APPLICATION FOR SPECIAL PROCESS REVIEW

Riverside County Code 4.52 and the California Health and Safety Code

[ ] INITIAL SUBMITTAL [ ] RESUBMITTAL

SPECIAL PROCESS TO BE REVIEWED: [ ] MICROBIAL CHALLENGE STUDY [ ] HACCP PLAN [ ] OTHER  
[ ] LAB ANALYSIS [ ] PERIODIC REVIEW

FACILITY NAME: \_\_\_\_\_

FACILITY ADDRESS: \_\_\_\_\_

FACILITY TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ITEM(S) TO BE EVALUATED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ CONTACT TELEPHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

### FEES:

- MICROBIAL CHALLENGE STUDY - \$199.00 PER HOUR
- LAB ANALYSIS - \$199.00 PER HOUR
- PERIODIC REVIEW - \$199.00 PER HOUR
- HACCP REVIEW - \$199.00 PER HOUR
- OTHER - \$199.00 PER HOUR

INITIAL SUBMITTAL REVIEW FEES DUE: \$ \_\_\_\_\_ .00

RESUBMITTAL REVIEW FEES DUE: \$ \_\_\_\_\_ .00

AN ENVIRONMENTAL HEALTH FEE IS REQUIRED FOR REVIEW OF A SPECIAL PROCESS. YOU ARE **NOT AUTHORIZED** TO OPERATE UTILIZING THIS PROCESS UNTIL ALL APPROVALS HAVE BEEN OBTAINED. FEES ARE NOT REFUNDABLE OR TRANSFERABLE.

I UNDERSTAND THE ABOVE STATED AND HEREBY APPLY FOR A SPECIAL PROCESS REVIEW, TO EVALUATE THE ITEM(S) AS SPECIFIED ABOVE, IN THE COUNTY OF RIVERSIDE.

DATE: \_\_\_\_\_ OWNER/OPERATOR: \_\_\_\_\_  
SIGNATURE DRIVERS LICENSE# / EXP. DATE

### COUNTY NOTES:

\_\_\_\_\_  
\_\_\_\_\_

For Our Office Locations Call Us at (888)722-4234 or Visit Our Website at www.rivcoeh.org