Georgia Department of Public Health
Environmental Health Branch
Tourist Accommodations Program

Tourist Accommodations Plan Review Checklist
Chapter 290-5-18

1. General Information

a. Facility Name _____

b. Facility Address_____

c. Type of Facility (Motel/Hotel, Campground/RV Park, Bed and Breakfast Inn)_____

d. Number of Units_____

e. Project Contact Person_____ Phone #_____

f. Date Submitted: _____ Date Approved: _____ Date Disapproved: _____

g. If disapproved, what other information or changes are needed?

_____
_____
_____
_____
_____

2. Water Supply

Yes	No	NA	
__	__	__	Water supply approved.
__	__	__	Cold running water provided to all equipment that uses water.
__	__	__	Hot and cold running water under pressure provided to all lavatories, bathing facilities, laundry facilities and all water-using equipment where eating and drinking utensils are washed.
__	__	__	Plans specify that hot water will not exceed 120°F.
__	__	__	Water supply adequately protected to preclude the possibility of back siphonage.
__	__	__	A “food grade” water hose is provided for filling trailer water tanks?
__	__	__	Water glasses, multiuse utensils and/or unlined ice buckets are used or supplied. What is the approved sanitizing method? (3 compartment sink_____ approved dishwasher_____)
__	__	__	Water glasses and multiuse utensils are protected from contamination. If used, how? _____
__	__	__	All drinking fountains are constructed of impervious material.
__	__	__	Do all drinking fountains have an angle jet nozzle above the overflow rim of the bowl which is protected by a non-oxidizing guard?
__	__	__	Ice is made from an approved water supply.
__	__	__	Ice machines automatically dispense.

3. Toilet Facilities

Yes	No	NA	
__	__	__	Toilet, lavatory and bathing facilities are provided as required in the rules.
__	__	__	All toilet, lavatory and bathing facilities are ventilated so that ductwork from toilet rooms do not connect into return ventilation ducts to any other room.
__	__	__	Soap in public restrooms dispensed from an approved container in a manner that prevents contamination.
__	__	__	Individual towels and bathmats are laundered in an acceptable manner. What is the method? Offsite laundry service _____On-site laundry facility_____
__	__	__	Central toilet facilities provide not less than one commode, one lavatory and one tub or shower - head for each sex for each ten trailer spaces or fraction thereof and for each ten dwelling units of non-permanent structure or fraction thereof .
__	__	__	A urinal is provided in each central toilet designated for men.

4. Sewers

Yes	No	NA	
__	__	__	Sewers designed in accordance with recognized engineering practices for the estimated sewage flow and approved by local building authority.
__	__	__	A sewer connection is provided to each independent trailer space which is not less than three inches in diameter, has suitable fittings to permit a watertight junction with a trailer outlet and can be closed when not in use to prevent escape of odors.

5. Sewage Disposal

Yes	No	NA	
__	__	__	Will on-site sewage disposed be required?
__	__	__	Application for an on-site sewage management system submitted.
__	__	__	Site evaluated and approved for an on-site sewage management system.

6. Plumbing

Yes	No	NA	
__	__	__	All plumbing comply with State and local laws, ordinances or regulations.

7. Garbage and Refuse Disposal

Yes	No	NA	
__	__	__	Approved containers for waste provided within 100 ft. of tourist accommodation or in an approved location.
__	__	__	Adequate cleaning facilities provided for cleaning waste containers and storage areas.
__	__	__	Dispose of water from cleaning operation as directed by Health Authority.

8. Insect and Rodent Control

Yes	No	NA	
__	__	__	Openings to the outside effectively protect against the entrance of rodents and insects.

9. Construction, Layout and Furnishings

Yes	No	NA	
__	__	__	Ventilation provided for all rooms.
__	__	__	If windows are the only means for ventilation, is the openable window area at least 1/20 of the floor area served?
__	__	__	If ventilation is provided by other means than windows, is system adequate to make one complete air change each twenty minutes?
__	__	__	Artificial light provided to maintain at least ten foot candles at 30” above floor level.

10. Heating and Fire Safety

Yes	No	NA	
__	__	__	All gas heaters vented to the outside of building.
__	__	__	Automatic natural gas heating equipment provided with an automatic safety pilot.
__	__	__	Liquefied petroleum gas burning appliances equipped with 100% safety cut off pilots.
__	__	__	Gas water heaters installed outside of bathrooms, bedrooms and connecting closets.

11. Swimming Pools

Yes	No	NA	
__	__	__	Plans for the swimming pool and or spa have been submitted and approved.
__	__	__	If a swimming pool at a bed and breakfast establishment is not approved for guest, it must be provided with a fence at least four feet high with a locked gate.

12. Laundry Rooms

Yes	No	NA	
__	__	__	Laundry facilities are separate from other facilities.
__	__	__	Laundry facilities for guest use are vented to the exterior, lighted, ventilated and separate from the tourist accommodation's laundry facility.
__	__	__	Hot and cold water is provided to laundry facilities.
__	__	__	Dryers are vented to the outside.

13. Grounds

Yes	No	NA	
__	__	__	Grounds are graded to drain and provided with serviceable walk and driveways.
__	__	__	At least 15 feet of clear space is provided between trailers and building.
__	__	__	At least 10 feet of clear space is provided between trailers and internal driveways.
__	__	__	Driveways are at least 20 feet wide and easily accessible to a public thoroughfare.
__	__	__	Grounded and weather-proof electrical outlets supplying at least 115 volts are located at each trailer space.
__	__	__	In recreational vehicle/trailer parks and campgrounds, power lines are located underground or suspended at least 18 feet above ground.

14. Food Service

Yes	No	NA	Food Menu Review
__	__	__	Will any food be provided at the facility? Based on the service and menu, which food operation is applicable:
			Food Service _____
			Bed and Breakfast _____ Continental Breakfast _____
__	__	__	Food service plans have been submitted and approved (if applicable).

Continental Breakfast Operation:

__	__	__	A two-compartment sink large enough to fully immerse the largest utensil used.
__	__	__	A refrigerator to maintain food temperatures at or below 41°F (5°C) is provided (if applicable).
__	__	__	Ice for beverages dispensed from a self service machine.

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Environmental Health Branch
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Yes	No	NA	Bed and Breakfast Inn Operation:
__	__	__	Floors, walls and ceilings materials are easy to clean as determined by the Health Authority.
__	__	__	Refrigeration facilities provided to maintain foods at or below 41°F (5°C).
__	__	__	Adequate means provided to maintain cooked foods at or above 140°F (60°C).
__	__	__	Are self service ice machines provided?
__	__	__	All equipment and utensils are constructed with safe materials, corrosion resistant and nonabsorbent, smooth and easily cleanable?
__	__	__	Three compartment sink provided for washing - rinsing - sanitizing dishes.
__	__	__	If a commercial dishwasher is provided, it must be NSF approved or equivalent.
__	__	__	If a non-commercial dishwasher is provided, does it use a high temperature rinse cycle or in lieu of this cycle is hot water delivered to the machine at a minimum of 155°F (68°C).
__	__	__	Sufficient area provided for handling soiled, clean and air drying utensils.

15. Plan Review Notes:

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16. Internal/External Coordination Information:

Check appropriate coordination requirements for permits or approvals applicable to this project:

- Water Supply: Public Water Utility ❒ EPD Permitted Well ❒ MOU Well ❒
- Sewage Disposal: Public Sewage/Utility ❒ On-site Sewage Management System ❒
- Food Operation: Continental Breakfast ❒ Foodservice Establishment ❒ Bed and Breakfast Meal ❒
- Type of Pool: Swimming Pool ❒ Spa ❒ Special Purpose ❒_____
- Local Authorities: Zoning ❒ Building Inspection ❒ Fire ❒ Other ❒_____

Signature: _____ Date:_____
Environmental Health Specialist