

HARNETT COUNTY CHILD CARE CENTER CHANGE OF OWNERSHIP APPLICATION

Review for compliance with NC Rules Governing the Sanitation of Child Care Centers (15A NCAC 18A .2800)

Applications must be submitted to Central Permitting at 420 McKinney Pkwy., Lillington, NC 27546 or PO Box 65, Lillington, NC 27546. If you have questions regarding this application, contact one of the following Environmental Health Specialists at 910-893-7547.

Gale Violette, REHS
Food and Lodging Program Specialist

Jamie Turlington, REHS
Environmental Health Specialist

Cindy Pierce, REHS
Environmental Health Specialist

Nikki Eason, REHS
Environmental Health Specialist

NAME OF CHILD CARE CENTER: The Children's Courtyard
CHILD CARE CENTER'S ADDRESS: 81 Plantation Dr. Cameron, NC 28326
PHONE: (910)436-0346 FAX: _____
APPLICANT'S NAME: Marsha Melvin
MAILING ADDRESS: 81 Plantation Dr. Cameron, NC 28326
PHONE: (910)436-0346 EMAIL: 3246@childrenscourtyard.com
DIRECTOR: Marsha Melvin
NUMBER OF CHILDREN FOR WHICH FACILITY WILL BE LICENSED: 259
AGE OF BUILDING: 14 YRS

Main Food Service

Meals prepared on site or catered meals? (With catered meals you are still required to have the minimum requirements in the kitchen) prepared on site

Where will the children eat meals? (Family style, tables in classrooms, dining area, etc...) tables in classrooms

Will multi-use utensils, silverware, sippy cups, etc... be used or disposable utensils? utensils and plate disposable reusable sippy cups

Can the kitchen door be locked? Is there a barrier to keep children out of the kitchen? yes door can be locked and yes a barrier to keep children out

Please list all equipment to be used in the kitchen and include specification sheets: dishwasher three sinks, handwashing sink, one freezer, and one refrigerator, prep table

Do you have a thermometer available to monitor food temperatures? yes Do you have thermometers in the refrigerators? yes

Will leftovers be served? no Will meals be prepared 12 or more hours in advance? no

Infant Food Service

Will bottles be stored, prepared, warmed, served, etc... in the infant room or in the kitchen? stored in classroom, prepared in kitchen, and warmed in classroom

Describe your procedures for handling breast milk: Each bottle must be labeled with green labels to identify its breast milk, each bottle must be warmed in a breast milk warmer labeled breast milk.

Does the infant room have countertop space for warming bottles? yes

What method will be used to warm bottles? bottle warmers in food prep areas.

Is there a refrigerator for bottle storage? yes Is there a thermometer? yes

Is there a separate sink used exclusively for bottle/food preparation? yes

Diaper Changing

Are diaper changing stations in each age appropriate room? yes

Where will diaper changing supplies be kept? In cabinet above diaper changing table

Is there a dirty diaper receptacle with a lid? yes

Can the caregiver view the children while changing diapers? yes

Where and how will soapy water, sanitizers and disinfectants be stored?
hanging above diaper changing sink

Is there a separate hand wash lavatory used exclusively for diaper changing hand washing?
yes

Are diaper changing signs provided? yes

Cubbies and Storage

How and where will cubbies be arranged? Each classroom have cubbies or hooks inside of there classrooms and additional space outside of the classroom.

Are coat hooks spaced at least 12" apart? yes

Is all storage in all closets stored off floor (recommend 12") to facilitate cleaning? yes

Will toothbrushes be used at the center? no Will they be labeled? no

Beds, Cots, Mats, Cribs, and Linens

Will cribs have the capability of being spaced 18" apart while in use? (if not, crib dividers and partitions are acceptable) yes

How and where will cots and/or mats be stored? inside of classroom

Where will crib, cot, and mat sheets be stored? Inside of classroom in a cabinet in a container

Where is there a designated sick area with cot/mat? office area

Is linen being provided by the center or the parents? linen is provided

How often will infant sheets be changed? everyday

How often will sheets be laundered? everyday

Cleaning, Sanitizing and Disinfecting

Is all furniture in the center of a smooth, washable finish? yes

How will toys in infant and toddler rooms be washed and sanitized? Where? How often?
teachers will wash & rinse toys in kitchen & spray toys w/ sanitizer.

Please explain what type of sanitizer will be used to sanitize toys, food areas, furniture, etc.:
Soap & water, rinse and sanitized with sanitizer (chlorine)

Hot Water Supply

The kitchen hot water temperature will need to be a minimum of 120 degrees Fahrenheit. All other sinks that are accessible to children and the can wash facility must be maintained between 80-110°Fahrenheit. Using two separate water heaters may be the best option since it is often difficult to obtain two separate temperatures with one water heater. Mixing valves installed on sinks have a high failure rate and are not very dependable.

Explain what the specifications of your water heater(s) are. (For example, if you are using two water heaters, indicate which one is for the kitchen and which one if for the classrooms). It is recommended that the minimum water heater size be 50 gallons.

Tank Manufacturer and Model # Rheem (1) 82V80-2 (2) 82MV52-2
 Storage tank size _____ GPH recovery _____ Additional tank size 87 gallons
 50 gallons

Lighting

Do all light fixtures have shatterproof or shielded bulbs? yes

Will lighting illuminate 50 ft. candles at all work areas? yes
 and 10 ft. candles at all other areas, including storage closets? yes

Finishes

Please describe the finishes/construction material in the following areas:

	Floors	Walls	Baseboards	Ceilings
Kitchen	tile	sheet rock		sheet rock
Bathrooms	tile	sheet rock		sheet rock
Infant Room	tile	sheet rock		sheet rock
Toddler Room	tile	sheet rock		sheet rock
Other Rooms	tile	sheet rock		sheet rock
Staff Room/Office	tile	sheet rock		sheet rock
Storeroom	tile	sheet rock		sheet rock
Other		sheet rock		sheet rock

*Wall to wall carpets must be cleaned at least every six months

Please explain what type of disinfectant will be used to sanitize toilets, lavatories and diaper changing tables: Soap & water and sanitize with disinfectant

Do you have appropriate test strips for the types of sanitizer and disinfectant you are using?

yes

Where is the can wash facility for cleaning trash cans, dumping mop water, etc...?

outside

Will water play centers be used? yes

Hand wash lavatories

Does each toilet area have a hand wash lavatory? yes

Does the diaper changing station have a hand wash lavatory exclusively for diaper changing?

yes

Does the food service area in the infant and toddler room have a lavatory exclusively for food service? yes

Does the kitchen have a hand sink that is separate from the 2 or 3 compartment sink for hand washing only? yes

What types of faucets are at all hand wash lavatories (please note that metering type is not allowed unless they can retain warm water for at least 20 seconds at the first pressing):

Kitchen, bathrooms, Room 13, Rm 2, Rm 11, Rm 6, Rm 1, Rm 4, Rm 5, Rm 3, Rm 7, Rm 8, Rm 9, Rm 21, Rm 14, Rm 15,

Are handwashing signs provided? yes

Locked Items

Please indicate **where** the following type of locked items will be stored and **what type** of lock:

Medicines (both refrigerated and non refrigerated)

inside of locked medicine box kitchen Fridge (office closet locked) (medicine box)

Cleaning supplies and all types of chemicals

Locked in supply closet

Personal belongings (purses, keys, employee items)

Inside Directors office or inside of car

Aerosols and all other toxic products

Locked in supply closet

Mildly Ill Children

Will you be licensed to care for mildly ill children pursuant to 10A NCAC 09 .2400? NO

Please include your protocols for this type of care.

Animals

What type of animals will be on the premises? none

Outside premises

Please describe the playground area (size, type of play equipment, type of fence, water activities, etc...) courtyard & playground 2877.63 sq ft

Is there chromated copper arsenate (CCA) pressure-treated wood in the play ground area?
no

What methods will you use to make this inaccessible to the children? _____

Is the can wash facility located outside? yes

If yes, is there a fence and lock around it so it is not accessible to children? yes

Is the HVAC, mechanical equipment, etc... locked with a fence around it so it is not accessible to children? yes

HARNETT COUNTY WATER SUPPLY AND WASTEWATER SYSTEM
APPLICATION

No application will be processed if this form is not completely filled out.

Water Supply:

Type of water supply: (check one)

- Non-public
- Community/Municipal
- Non-transient, non-community
- Transient, non-community

Is an annual water sample required of your establishment? (check one)

- Yes
- No

Wastewater System:

Type of wastewater system: (check one)

- Public sewer
- On-site septic system

Number of children: 259

Number of employees: 35



Initial Application Date: mm 2-11-2022

Application # _____
DRB # _____ CU # _____

COMMERCIAL

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting (Physical) 108 E. Front Street, Lillington, NC 27546 (Mailing) PO Box 65 Lillington NC 27546 Phone: (910) 893-7525 opt # 2 Fax: (910) 893-2793 www.harnett.org/permits

LANDOWNER: MDC-NC3-LP Mailing Address: 11995 El-Camino Real

City: San Diego State: CA Zip: 92130 Contact # 858-284-5200 Email: 3246@childrenscourtyard.com

APPLICANT*: _____ Mailing Address: _____

City: _____ State: _____ Zip: _____ Contact # _____ Email: _____

*Please fill out applicant information if different than landowner

CONTACT NAME APPLYING IN OFFICE: Marsha Melvin Phone # 910-436-0346

Address: 81 plantation Drive PIN: _____

Deed Book Page: 1

PROPOSED USE:

- Multi-Family Dwelling No. Units: _____ No. Bedrooms/Unit: _____
- Business Sq. Ft. Retail Space: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Daycare # Preschoolers: _____ # Afterschoolers: _____ # Employees: _____ Hours of Operation: 5:30am-6:30pm
- Industry Sq. Ft: _____ Type: _____ # Employees: _____ Hours of Operation: _____
- Church Seating Capacity: _____ # Bathrooms: _____ Kitchen: _____
- Accessory/Addition/Other (Size _____ x _____) Use: _____

Water Supply: County Existing Well New Well (# of dwellings using well _____) *Must have operable water before final (Need to Complete New Well Application at the same time as New Tank)

Sewage Supply: New Septic Tank Expansion Relocation Existing Septic Tank County Sewer
(Complete Environmental Health Checklist on other side of application if Septic)

Comments: _____

If permits are granted I agree to conform to all ordinances and laws of the State of North Carolina regulating such work and the specifications of plans submitted. I hereby state that foregoing statements are accurate and correct to the best of my knowledge. Permit subject to revocation if false information is provided.

Marsha Melvin
Signature of Owner or Owner's Agent

2-11-2022
Date

****This application expires 6 months from the initial date if permits have not been issued****

RECORDED DEED (OR OFFER TO PURCHASE) AND PLAT ARE REQUIRED WHEN APPLYING FOR LAND USE APPLICATION

*****It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.*****

This application expires 6 months from the initial date if permits have not been issued



APPLICATION CONTINUES ON BACK

****This application expires 6 months from the initial date if permits have not been issued****

This application to be filled out when applying for a septic system inspection.

County Health Department Application for Improvement Permit and/or Authorization to Construct

IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration)

Environmental Health New Septic System

- **All property irons must be made visible.** Place "pink property flags" on each corner iron of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting.
- Place orange Environmental Health card in location that is easily viewed from road to assist in locating property.
- If property is thickly wooded, Environmental Health requires that you clean out the **undergrowth** to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. ***Do not grade property.***
- **All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready.**

Environmental Health Existing Tank Inspections

- Follow above instructions for placing flags and card on property.
- Prepare for inspection by removing soil over **outlet end** of tank as diagram indicates, and lift lid straight up (*if possible*) and then **put lid back in place.** (Unless inspection is for a septic tank in a mobile home park)
- **DO NOT LEAVE LIDS OFF OF SEPTIC TANK**

"MORE INFORMATION MAY BE REQUIRED TO COMPLETE ANY INSPECTION"

SEPTIC

If applying for authorization to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.

- Accepted Innovative Conventional Any
 Alternative Other _____

The applicant shall notify the local health department upon submittal of this application if any of the following apply to the property in question. If the answer is "yes", applicant **MUST ATTACH SUPPORTING DOCUMENTATION**:

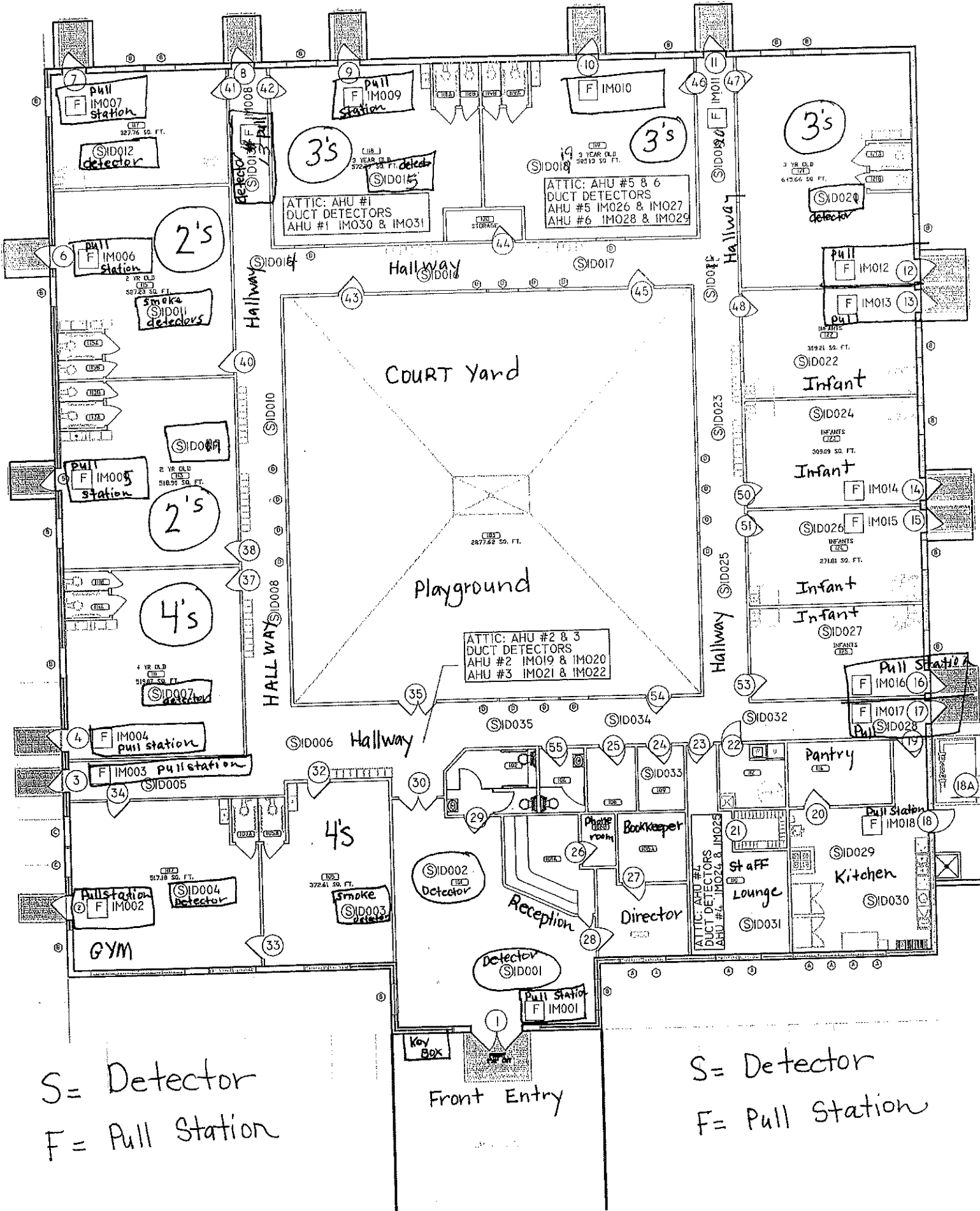
- YES NO Does the site contain any Jurisdictional Wetlands?
 YES NO Do you plan to have an irrigation system now or in the future?
 YES NO Does or will the building contain any drains? Please explain. _____
 YES NO Are there any existing wells, springs, waterlines or Wastewater Systems on this property?
 YES NO Is any wastewater going to be generated on the site other than domestic sewage?
 YES NO Is the site subject to approval by any other Public Agency?
 YES NO Are there any Easements or Right of Ways on this property?
 YES NO Does the site contain any existing water, cable, phone or underground electric lines?

If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted Right Of Entry To Conduct Necessary Inspections To Determine Compliance With Applicable Laws And Rules. I Understand That I Am Solely Responsible For The Proper Identification And Labeling Of All Property Lines And Corners And Making The Site Accessible So That A Complete Site Evaluation Can Be Performed.

Cameron

Fire Exit Plan



S = Detector
F = Pull Station

S = Detector
F = Pull Station