

12500 29988

**HARNETT COUNTY PLAN REVIEW APPLICATION COVER LETTER  
FOOD SERVICE ESTABLISHMENTS**

Unless directed otherwise, all items are to be submitted through the Central Permitting Office at 108 East Front St., Lillington, NC 27546 or by mail to PO Box 65, Lillington, NC 27546. You may contact the Central Permitting Office at 910-893-7525, Ext. 2. However, please contact our office with questions regarding the contents of this application.

Plans are reviewed using North Carolina's 15A NCAC 18A .2600 "Rules Governing the Food Protection and Sanitation of Food Establishments." To view these rules, go to <http://www.deh.enr.state.nc.us/rules.htm> or obtain a copy from our office at 307 West Cornelius Harnett Boulevard, Lillington, NC 27546. For additional information regarding facility design, you can access the plan review link of the Environmental Health section on the Health Department's website at [www.harnett.org](http://www.harnett.org). Plans must be submitted to the local health department for approval **prior to** construction, renovation, or modification of such facilities.

\*Franchised, chain, and prototyped facilities are required to submit a separate application and plans to the Department of Public Health, Environmental Health Section Plan Review Unit at 5605 Six Forks Rd., Raleigh, NC 27609.

If you have questions, contact one of the following Food and Lodging staff listed below at 910-893-7547:

Gale Greene, REHS  
Food and Lodging Program Specialist

Jamie Turlington, REHS  
Environmental Health Specialist

Cindy Pierce, REHS  
Environmental Health Specialist

Plans must be submitted with the following supporting documentation:

- \_\_\_\_\_ Complete set of plans drawn to scale showing the placement of each piece of food service equipment, storage areas, trash can wash facilities, etc. along with general plumbing, electrical, mechanical, and lighting drawings
- \_\_\_\_\_ Plans must include a site plan locating exterior equipment such as dumpsters or walk ins
- \_\_\_\_\_ A complete equipment list and corresponding manufacturer specification sheets
- \_\_\_\_\_ A proposed menu
- \_\_\_\_\_ A completed Food Service Plan Review Application
- \_\_\_\_\_ \$200 Plan Review Fee

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STODOLSKY ESTABLISHMENT

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**Food Service Plan Review Application**

Type of plan: New \_\_\_\_\_ Remodel

Name of Establishment: Community Trade Center

Physical Address: 8018 Elliot Bridge Rd.

City: Spring Lake State: NC Zip: 28390

Phone (if available): 910-818-1890 Fax: 910-497-9387

Email: lexusfarms@aol.com

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Applicant: Ronald Hope Adams

Address: 20 Ronnie Lane

City: Spring Lake State: NC Zip: 28390

Phone: 910-850-8267 Fax: 910-497-9387

Email: \_\_\_\_\_

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Owner (if different from Applicant): \_\_\_\_\_

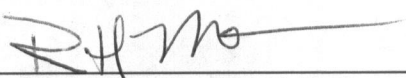
Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

I certify that the information in this application is correct, and I understand that any deviation without prior approval from this Department may nullify plan approval.

Signature:  Date: 10-29-12  
(Applicant or Responsible Representative)

From Secretary of the Board of Trustees

Received

The above sum of \$10,000.00  
has been received from the  
Trustees of the Board of Trustees  
of the University of California  
for the purpose of the  
University of California  
Library Building  
at the University of California  
at Berkeley, California  
and is hereby acknowledged  
as such.

Witness my hand and the seal of the Board of Trustees of the University of California at Berkeley, California, this 15th day of October, 1954.

15-10-54

Secretary of the Board of Trustees



**Hours of Operation:**

Mon TBD Tues TBD Wed TBD Thurs TBD Fri TBD Sat TBD Sun TBD

**Number of Seats:** 22

**Facility total square feet:** 4320 total B11

**Projected start date:** upon approval

**Type of Food Service:**

- Restaurant
- Food Stand
- Drink Stand
- Commissary
- Meat Market
- Other (explain): \_\_\_\_\_

**Check all that apply**

- Sit down meals
- Take-out meals
- Catering

**Utensils:**

Multi-use (reusable):  Single-use (disposable):

**Food delivery schedule** (per week): 1

Indicate any **specialized process** that will take place:

- Curing  Acidification (sushi, etc.)  Smoking
- Reduced Oxygen Packaging (e.g. vacuum packaging, sous vide, cook-chill, etc.)

Has the process been approved by the Variance Committee of the DPH Food Protection Branch? \_\_\_\_\_

Indicate any of the following **highly susceptible populations** that will be catered to or served:

- Nursing/Rest Home  Child Care Center  Health Care Facility
- Assisted Living Center  School with pre-school aged children or an immunocompromised population

Page 1 of 1

1. Name of the trust or estate  
2. Federal identification number (if any)

3. Name of the recipient  
4. Federal identification number (if any)  
5. Name of the trust or estate (if different from 1.)  
6. Federal identification number (if any)

7. Name of the trust or estate (if different from 1.)  
8. Federal identification number (if any)

9. Name of the trust or estate (if different from 1.)  
10. Federal identification number (if any)

11. Name of the trust or estate (if different from 1.)  
12. Federal identification number (if any)

**Water Supply:**

Type of water supply: (check one)

- Non-public (well)
- Community/Municipal

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

**Water Heater:**

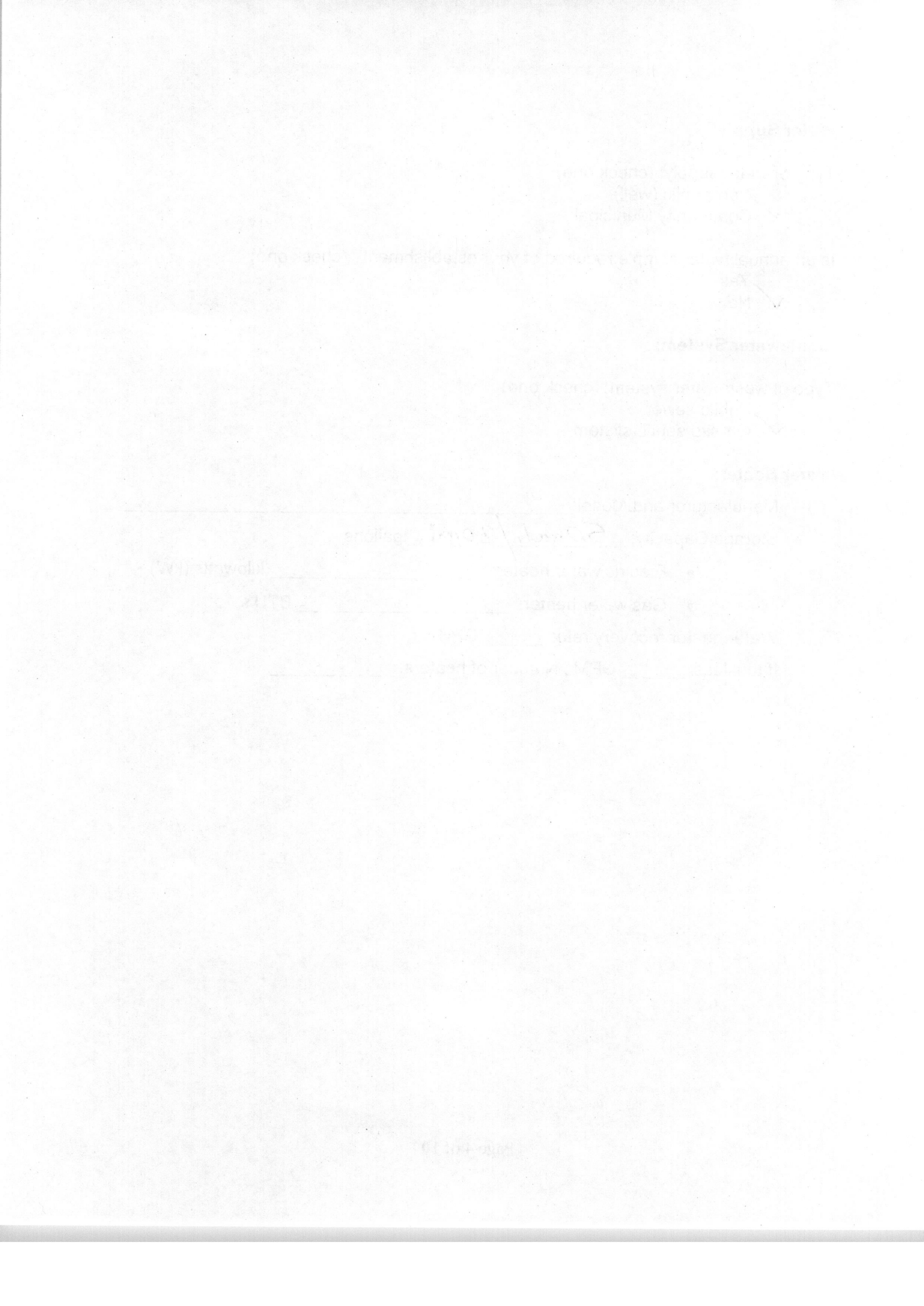
Manufacturer and Model: \_\_\_\_\_

Storage Capacity: 50 gal. / 20 gal. gallons

- Electric water heater: \_\_\_\_\_ kilowatts (kW)
- Gas water heater: \_\_\_\_\_ BTU's

Water heater recovery rate: \_\_\_\_\_ GPH

If tankless, \_\_\_\_\_ GPM ; Number of heaters: \_\_\_\_\_



**Person in Charge (PIC) and Employee Health**

Are Persons in Charge certified food protection managers who have passed a test accredited by an approved ANSI program? \_\_\_\_\_

Eligible Person In Charge: \_\_\_\_\_

Program \_\_\_\_\_ Cert. # \_\_\_\_\_ Exp. Date \_\_\_\_\_

For multiple shifts and/or occasions of absences, list all eligible Persons in Charge:

Eligible Person In Charge: \_\_\_\_\_

Program \_\_\_\_\_ Cert. # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Eligible Person In Charge: \_\_\_\_\_

Program \_\_\_\_\_ Cert. # \_\_\_\_\_ Exp. Date \_\_\_\_\_

\*Attach a copy of your establishment's Employee Health Policy

Are copies of signed Employee Health Policies on file? \_\_\_\_\_

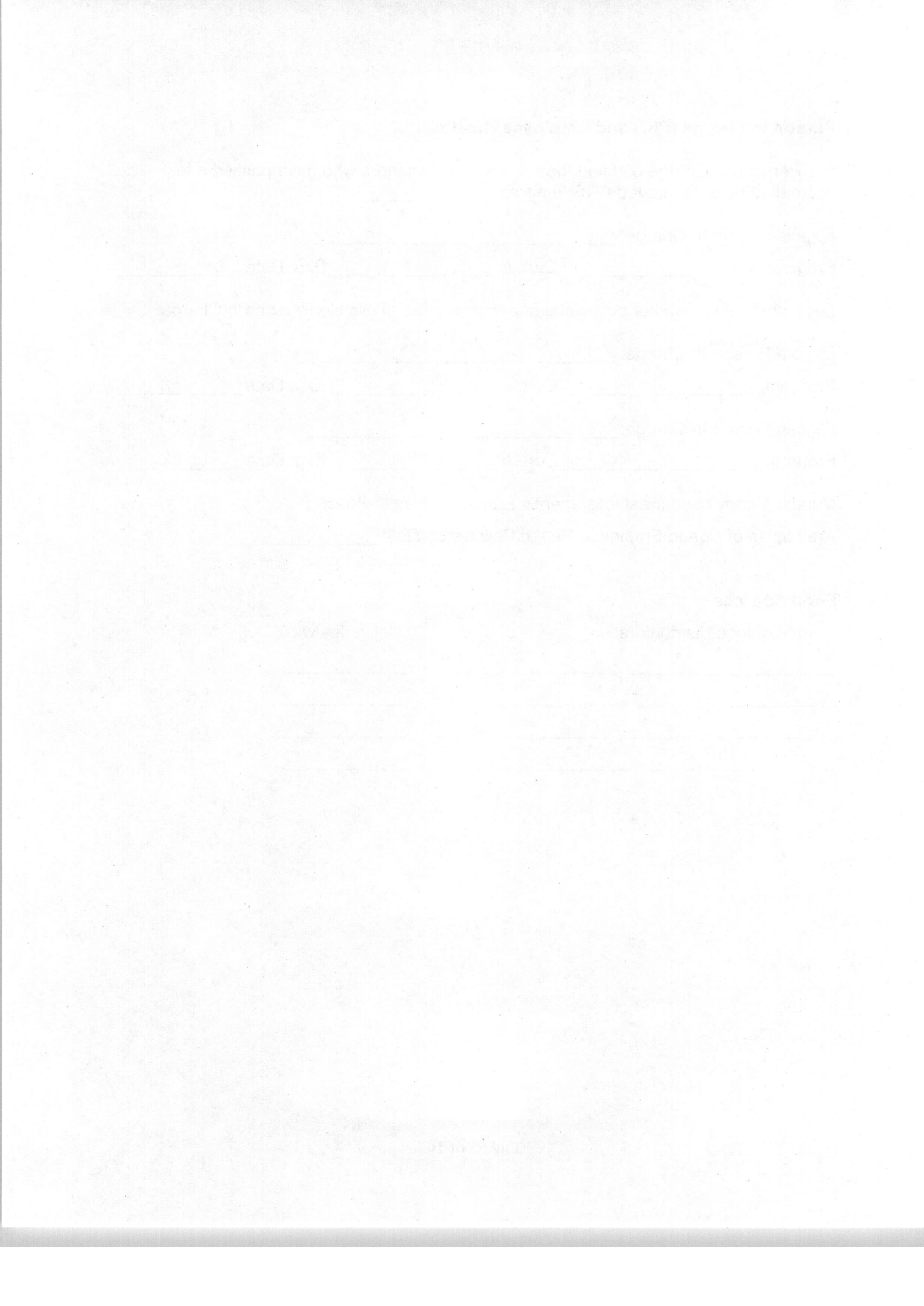
**Food Sources**

Names of food distributors:

Deliveries/wk

- |    |       |       |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |





**Time/Temperature Control for Food Safety**

Foods that will be held **hot** before serving: chicken, fish, hamburger,  
vegetables, soups, breads, pork

Foods that will be held **cold** before serving: vegetables, salad, fruit

Will **time** be used as a method to control for food safety? \_\_\_\_\_

Will a buffet be provided? \_\_\_\_\_ If so, attach a list of foods that will be on the buffet.

**Cooling**

List foods that will be cooked and cooled for later use or added to another food as an ingredient: \_\_\_\_\_

Describe utensils and methods used to cool foods: \_\_\_\_\_

**Dry Storage**

Frequency of deliveries per week: 1 Number of dry storage shelves: \_\_\_\_\_

Square feet shelf space: \_\_\_\_\_ ft<sup>2</sup>

Is a separate room designated for dry storage? Yes

**Food Preparation Facilities**

Number of food prep sinks: 3 Are separate sinks provided for vegetables and meats? \_\_\_\_\_

Size of sink drain boards (inches): \_\_\_\_\_

How will sinks be sanitized after use or between meat species? Sanitizer spray

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**Dishwashing Facilities**

**Manual Dishwashing**

Number of sink compartments: 3

Size of sink compartments (inches): Length \_\_\_\_\_ Width \_\_\_\_\_ Depth \_\_\_\_\_

Length of drain boards (inches): Right \_\_\_\_\_ Left \_\_\_\_\_

Are the basins large enough to immerse your largest utensil? yes

What type of sanitizer will be used?

Chlorine  Quaternary \_\_\_\_\_ Hot water (171°F)  Other (specify) \_\_\_\_\_

**Mechanical Dishwashing**

Will a dishmachine be used? Yes \_\_\_\_\_ No

Dishmachine manufacturer and model: \_\_\_\_\_

Hot water sanitizing? \_\_\_\_\_ or chemical sanitizing? \_\_\_\_\_

How will large utensils such as prep tables, dough mixing bowls, slicers, and other food contact surfaces that cannot be submerged in sinks or put through a dishwasher be cleaned and sanitized? with spray sanitizer

How many air drying shelves will you have? 5

Calculate the square feet of total air drying space: \_\_\_\_\_ ft<sup>2</sup>

**Hand washing**

Indicate number and locations of hand sinks in the establishment: 3 - one in each kitchen and one in each bathroom.

**Employee Area**

Indicate location for storing employees' personal items: dry storage



1. The first part of the paper discusses the importance of the study. It highlights the need for a comprehensive understanding of the subject matter. The authors argue that this research is crucial for advancing the field and addressing the current challenges. The study is designed to explore the relationship between the variables and to provide a detailed analysis of the data. The results of the study are expected to have a significant impact on the industry and to provide valuable insights for future research. The authors also discuss the limitations of the study and the need for further investigation in this area.

2. The second part of the paper presents the methodology used in the study. The authors describe the data collection process, the sample size, and the statistical methods employed. The study is a quantitative research design, and the data is collected through a series of surveys and interviews. The sample size is large enough to ensure the reliability of the results. The statistical methods used include regression analysis, correlation analysis, and hypothesis testing. The authors also discuss the ethical considerations of the study and the steps taken to ensure the confidentiality and anonymity of the participants. The methodology is designed to provide a rigorous and systematic approach to the research.

3. The third part of the paper presents the results of the study. The authors provide a detailed analysis of the data and discuss the findings. The results show a strong positive correlation between the variables, which supports the hypothesis. The regression analysis indicates that the independent variable has a significant positive effect on the dependent variable. The authors also discuss the implications of the findings for the industry and for future research. The results suggest that there is a need for further research in this area to explore the underlying mechanisms and to identify the factors that influence the relationship. The authors conclude that the study has provided valuable insights into the relationship between the variables and that the findings have important implications for the field.

4. The fourth part of the paper discusses the conclusions and the implications of the study. The authors summarize the key findings and discuss the implications for the industry and for future research. The study has provided a comprehensive understanding of the relationship between the variables and has identified the factors that influence the relationship. The findings have important implications for the industry and for future research. The authors conclude that the study has provided valuable insights into the relationship between the variables and that the findings have important implications for the field. The authors also discuss the limitations of the study and the need for further investigation in this area. The study is a significant contribution to the field and provides a solid foundation for future research.



**Finish Schedule**

\*Floor, wall and ceiling finishes (vinyl tile, acoustic tile, vinyl baseboards, FRP, etc.)

AREA	FLOOR	BASE	WALLS	CEILING
Kitchen	VCT	VCOVE	Drywall FRP	Clean Acoustic
Bar				
Food Storage	VCT	VCOVE	Drywall	Clean Acoustic
Dry Storage	VCT	VCOVE	Drywall	Acoustic
Toilet Rooms	VCT	VCOVE	Drywall	Acoustic
Garbage & Can Wash Areas	VCT	VCOVE	Drywall	Acoustic
Other				
Other				

**Garbage, Refuse and Other**

Will trash be stored in the restaurant overnight? Yes \_\_\_\_\_ No  If so, how will it be stored to prevent contamination? \_\_\_\_\_

Location and size of can wash facility: outside

Are hot and cold water provided as well as a threaded nozzle? yes

Will a dumpster be provided? yes

Do you have a contract with the dumpster provider for cleaning? yes

How will used grease be handled? Contract grease dumpster

Is there a contract for grease trap cleaning? no

Are doors self-closing? yes Fly fans provided? no

Where will chemicals be stored? dry storage on bottom shelf

Where will clean linen be stored? dry storage

Where will dirty linen be stored? dry storage

1. Name of the person: \_\_\_\_\_  
2. Address: \_\_\_\_\_  
3. City: \_\_\_\_\_  
4. State: \_\_\_\_\_  
5. Zip: \_\_\_\_\_  
6. Telephone: \_\_\_\_\_  
7. Date: \_\_\_\_\_

8. Signature: \_\_\_\_\_  
9. Printed Name: \_\_\_\_\_  
10. Title: \_\_\_\_\_  
11. Organization: \_\_\_\_\_  
12. Date: \_\_\_\_\_

## FOOD HANDLING PROCEDURES

Explain the following with as much detail as possible. Complete descriptions including specific areas of the kitchen and corresponding items on the plan where food is handled will expedite the plan review process. Incomplete descriptions may result in the application being returned.

Explain the entire food handling procedure for each food item on the proposed menu. Including:

- How the food will arrive (frozen, fresh, packaged, etc.)
- Where the food will be stored
- Where and how the food will be thawed
- Where (prep tables, sink, counter, etc.) the food will be handled (washed, cut, marinated, breaded, cooked, etc.)
- When (time of day and frequency/day) food will be handled
- Whether or not the food or any part of the food will be used as leftovers or as any ingredient in a future dish
- How the food will be cooled if applicable

### FOOD PRODUCT \_\_\_\_\_

Fish - frozen - freezer  
Hamburger - fresh - freezer - refrigerator  
Pork - fresh - freezer - refrigerator  
Chicken - fresh - freezer - refrigerator  
Soups prepared in kitchen - refrigerator  
Breads - packaged - shelf

Salad - prep station  
fruit - refrigerator  
vegetables - prep station - refrigerator  
Hot dogs - packaged - refrigerator - freezer

### FOOD PRODUCT \_\_\_\_\_

Fish - will come in frozen stored in freezer  
thawed in cold water stored in leak proof  
plastic bags changing water every 30 minutes

Hamburger - will be purchased fresh repackaged  
in freezer bags portion size thawed as need in  
refrigerator daily on lower shelf in a pan as not  
to leak any fluids or juices.

Pork - will come in fresh or frozen stored  
accordingly will thaw in refrigerator or cold water





**FOOD PRODUCT** \_\_\_\_\_

Chicken - will come in fresh or frozen stored accordingly will thaw in refrigerator or cold water.

Fruits and vegetables - will come in fresh or packaged and stored in refrigerator or deli prep until used will be prepared in designated area on cutting board sanitizing before and after using.

**FOOD PRODUCT** \_\_\_\_\_

**FOOD PRODUCT** \_\_\_\_\_

\*\*\*ADDITIONAL SHEETS ARE AVAILABLE



FOOTNOTES

1. The first part of the paper is devoted to a discussion of the general theory of the subject. It is shown that the theory is based on the principle of least action, and that the equations of motion can be derived from this principle. The second part of the paper is devoted to a discussion of the applications of the theory to the case of a particle in a magnetic field. It is shown that the theory predicts the existence of a magnetic moment for the particle, and that this moment is proportional to the spin of the particle.

FOOTNOTES

FOOTNOTES

APPENDIX I

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