Food Service Plan Review Application

Name of Establishment: Community Mart 12
Physical Address: 920 S MADU 81
City: Lillington State: N.C. Zip: 27546
Phone (if available): Fax:
Email: 9. M Stores @ Yhow Com
Applicant: Shahbain, Abdroghator Address: 1312 N Fulton St. City: Retard State: N.C. Zip: 28372 Phone: 910 - 421-2121 Fax: Email: Owner (if different from Applicant): Same As Above 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: 2/8/201/ (Applicant or Responsible Representative)

Hours of Operation:	and the sur than the
Mon <u>5-7</u> Tues <u>5-7</u> Wed <u>5-</u>	$\frac{7}{7}$ Thurs $\frac{5}{5}$ - $\frac{7}{7}$ Fri $\frac{5}{5}$ - $\frac{7}{7}$ Sat $\frac{5}{5}$ - $\frac{7}{7}$ Sun $\frac{7}{7}$ - $\frac{4m}{7}$ Pm
Number of Seats: 42	A - (
Facility total square feet: 25	00 sg ++
Facility total square feet: 25 Projected start date: 02.08	8.21
Type of Food Service:	Check all that apply
Restaurant	Sit down meals
Food Stand	Take-out meals
Drink Stand	Catering
Commissary	
Meat Market	
Other (explain):	
Utensils:	
Multi-use (reusable):	Single-use (disposable):
Food delivery schedule (per we	ek): DNCE Per WEEK
Indicate any specialized process	s that will take place: N/A
Curing Acidification	on (sushi, etc.) Smoking
Reduced Oxygen Packagi	ng (e.g. vacuum packaging, sous vide, cook-chill, etc.)
	by the Variance Committee of the DPH Food
Protection Branch?	
Indicate any of the following high served:	ly susceptible populations that will be catered to or
Nursing/Rest Home	Child Care CenterHealth Care Facility
Assisted Living Center _	School with pre-school aged children or an immunocompromised population

water Supply:
Type of water supply: (check one) Non-public (well) Community/Municipal
Is an annual water sample required of your establishment? (check one) Ses No
Wastewater System:
Type of wastewater system: (check one) Public sewer On-site septic system
Water Heater: Manufacturer and Model: AHRI CERTIFEL
Storage Capacity: gallons gallons
Electric water heater:
Gas water heater:BTU's
Water heater recovery rate: GPH
If tankless, GPM; Number of heaters:

Person in Charge (PIC) and Employee Health

1. 2.

3.

Are Persons in Charge certified to accredited by an approved ANSI Note: Employeus Charles Eligible Person In Charge:	program?	N Next AVEILABLE classes.
		Exp. Date
Program	_ Ocit. #	
For multiple shifts and/or occasion	ons of absences, lis	t 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 establishments: Health Dept prov Are copies of signed Employee H	nent's Employee Ho	ealth Policy le?
Food Sources		
Names of food distributors:		Deliveries/wk
US Food		Unoe/week

Time/Temperature Control for Food Safety
Foods that will be held hot before serving:
Foods that will be held cold before serving:
Will time be used as a method to control for food safety?
Will a buffet be provided? N/M 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: N
Dry Storage
Frequency of deliveries per week: Mee/WNumber of dry storage shelves: 34 Skelves
Frequency of deliveries per week: New/WNumber of dry storage shelves: 24 Skelves Square feet shelf space: ft2 (27.4 Hong X 7.6 Wide)
Is a separate room designated for dry storage?
Food Preparation Facilities (4. be purchased upon approval)
Number of food prep sinks: Are separate sinks provided for vegetables and meats? N/A For Chicken only! Size of sink drain boards (inches): 18"
How will sinks be sanitized after use or between meat species? All food preparation will be washed raised and sanitized between batched preparation.

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

Dishwashing Facilities Manual Dishwashing Number of sink compartments: Size of sink compartments (inches): Length Width 16" Depth 12" Length of drain boards (inches): Right <u>24</u> "Left <u>24</u>" Are the basins large enough to immerse your largest utensil? No (wash IN place) 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? WASh RING And SANITEZE IN PLACE. How many air drying shelves will you have? _____ Calculate the square feet of total air drying space: Hand washing SINK. No cated At the Enternie to the Kitchen

shall be stored In their walnicles

Indicate location for storing employees' personal items: No (Employees belongings

Employee Area

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 <u>each food item on the proposed menu</u>. 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 Marken: All the chicken ARKEVES FRESK
And Is Stored In the WALK IN Cooler until rendy
2) The chicken Is removed from WIC and witshed.
3) After washing and autting It Is divided Into Sections (breast legs; wings; thinks)
and prepared for trying until such tome the
5) Fred ches a minimum temp 1250 F (~ 202° F
De Cooked until done (No pinke) 1) Placed IN A WARMEN to MADRIAIN 135°F
7) DISCARD LETT WERS.
1) Acepte Feoren Stored on WIF
1) Alegre Frozen Stored on WIF 3) Naggets Are cooked Frozen to Amorimun temp
3) Cooked to order (Dastomer request)

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: This facility has A SENTER
Are hot and cold water provided as well as a threaded nozzle?
Will a dumpster be provided?
Do you have a contract with the dumpster provider for cleaning?
How will used grease be handled? A grease contriber is located outside.
How will used grease be handled? A grease continuer is located outside. Is there a contract for grease trap cleaning? VAILEY Proteins
Are doors self-closing? Jes Fly fans provided? NA Where will chemicals be stored? Area designated for Chemicals mly. Dey Where will clean linen be stored? Storage Room (Shelf)
Where will chemicals be stored? Area designated for Chemicals my Dey
Where will clean linen be stored? Storage Room (Shelf) Roome
Where will dirty linen be stored? Storage Room (Soiled Continuer)

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One Compartment - Double Drainboard

Stainless Steel Compartment Sinks

Certifications:





Features:

- 1/4" Pitched Drainboards To Ensure Proper Drainage
- 1 1/2" Rounded Front and Side Edges
- · Accommodates 8" On Center Faucets
- · Drain Included
- 9" Backsplash

Options:

- · Pre-Rinse Units & Faucets
- · Lever Drains
- · Upgraded Bullet Feet
- · Slant Rack Shelf (BK-SSH)
- · End Splash (BKS-RES)
- · S/S Basket Drain (BKDR-4-304)

Material:

- T-304 18 ga. Stainless Steel Deck & Bowl
- 15/8 " Galvanized Legs
- · Adjustable High Impact Corrosion Resistant Feet
- · Models ending with "S" have Stainless Steel Legs, End Bracing and Adjustable Stainless Steel over Plastic Bullet Feet

Model #s ending with "S":

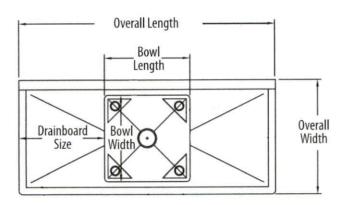
- T-304 18 ga. Stainless Steel Deck & Bowl
- · Stainless Steel Legs
- · Stainless Steel End Bracing
- · Adjustable Stainless Steel over Plastic Bullet Feet

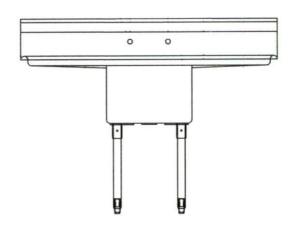
Part Number	Unit Size (I x w)	Bowl Dim. (I x w x d)	Sets of Faucet Holes	Drainboard Size	Legs
BKS-1-1620-12-18T	52" x 25 13/16"	16" x 20" x 12"	1	(2) - 18"	Galvanized
BKS-1-1620-12-18TS	52" x 25 ^{13/16} "	16" x 20" x 12"	1	(2) - 18"	Stainless Steel w/ End Bracing
BKS-1-18-12-18T	54" x 23 ^{13/16} "	18" x 18" x 12"	1	(2) - 18"	Galvanized
BKS-1-18-12-18TS	54" x 23 ^{13/16} "	18" x 18" x 12"	1	(2) - 18"	Stainless Steel w/ End Bracing
BKS-1-1824-14-24T	66" x 29 13/16"	18" x 24" x 14"	1	(2) - 24"	Galvanized
BKS-1-1824-14-24TS	66" x 29 ^{13/16} "	18" x 24" x 14"	1	(2) - 24"	Stainless Steel w/ End Bracing
BKS-1-24-14-24T	72" x 29 ^{13/16} "	24" x 24" x 14"	1	(2) - 24"	Galvanized
BKS-1-24-14-24TS	72" x 29 ^{13/16} "	24" x 24" x 14"	1	(2) - 24"	Stainless Steel w/ End Bracing

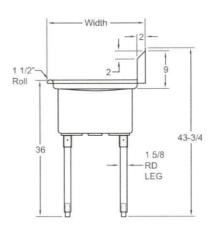


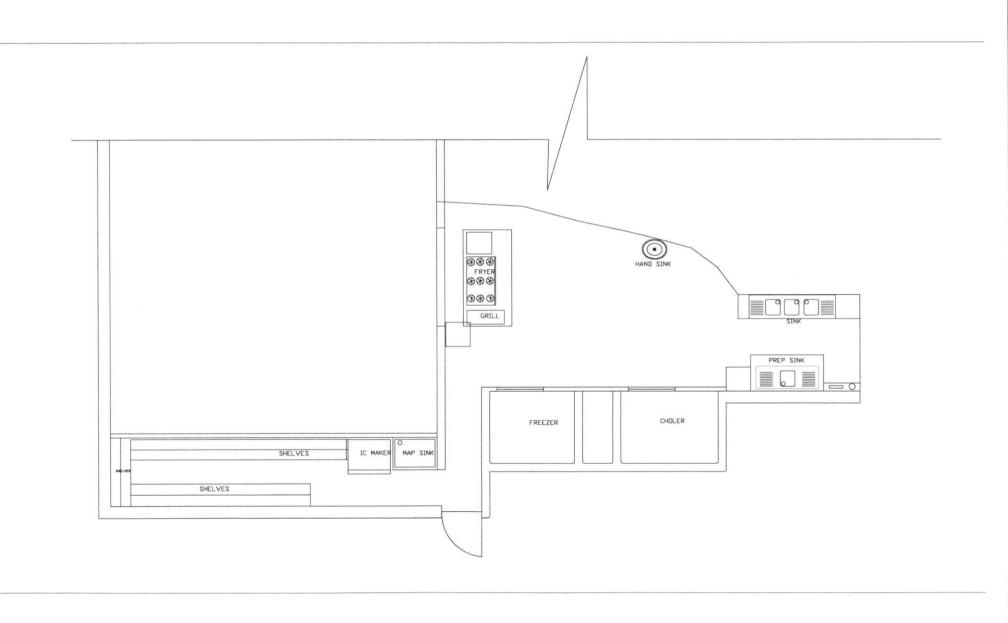
Use your smart phone scan the above QR cod visit our website: www.bk-resources.cc











HARNETT COUNTY PLAN REVIEW APPLICATION COVER LETTER FOOD SERVICE ESTABLISHMENTS CHANGE OF OWNERSHIP

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Potential owners are required to complete this application so we may collect the necessary information for the purpose of issuing a permit for an establishment that may have or has changed ownership. All questions must be completed so that we can determine if any operational changes may occur or if the type of food preparation will be modified. A proposed menu must be submitted with this application

This application will be reviewed using North Carolina's 15A NCAC 18A .2600 "Rules Governing the Food Protection and Sanitation of Food Establishments" and the NC Food Code Manual. 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. This application must be submitted to the local health department for approval prior to the change of ownership.

Submit completed application to:

Harnett County Health Department Environmental Health Section 307 West Cornelius Harnett Blvd. Lillington, NC 27546

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

Gale Violette, REHS
Food and Lodging Program Specialist

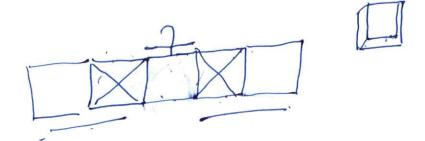
Cindy Pierce, REHS
Environmental Health Specialist

Nikki Eason, REHS
Environmental Health Specialist

Plans must be submitted with the following supporting documentation:

_____ A proposed menu
____ A completed Food Service Plan Review Application/Change of Ownership

09/19 gv



- Le Inch eurbing on three sides - Sloped to Center draw

