

# The Perk on Broad Coffee Roasters and Café

## BREAKFAST

### Bagels

Plain, Blueberry or Everything

Choice of Cream Cheese, Butter or Jam (Strawberry and Grape)

### Breakfast Sandwiches

*\*Served on your choice of Biscuit, Bread, Bagel or Croissant*

Sausage, Bacon or Ham (Add Cheese and Egg) Plant-based options available

### Avocado Toast

House-made Avocado spread, Grape Tomatoes, Micro-greens, Balsamic Glaze

### Waffles

Plain or choice of toppings: Blueberry, Strawberry, Bananas, Nutella, Whipped cream

## LUNCH

### Sandwiches

*\*Served on your choice of Bread or Croissant*

Hot Ham and Swiss with Honey Mustard

Cucumber Sandwich

Turkey Avocado with Arugula and Garlic Aioli

### Panini

Turkey Artichoke Spinach Cheese

Cheesy Hummus and Veggie

Sun Dried Tomato, Pesto with Bacon and Cheese

### Sides

Choice of Chips, Pasta Salad or Roasted Brussel Sprouts

### Soup

Vegetable or Chili

## BAKED GOODS

Assortment of Cookies, Muffins and Scones provided by local bakeries

\*All meat has been pre-cooked

Soup

Vegetable or Chili

BAKED GOODS

Assortment of Cookies, Muffins and scones provided by local bakeries

\*All meat has been pre-cooked

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## 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 420 McKinney Pkwy., 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* 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. 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 a Registered Environmental Health Specialist at 910-893-7547:

Plans must be submitted with the following supporting documentation:

- \_\_\_\_\_ A 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-in coolers
- \_\_\_\_\_ A complete equipment list and corresponding manufacturer specification sheets
- \_\_\_\_\_ A proposed menu
- \_\_\_\_\_ A completed Food Service Plan Review Application
- \_\_\_\_\_ \$200 Plan Review Fee

08/22

gv

## Food Service Plan Review Application

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

Name of Establishment: Jake Park on Broad

Physical Address: 311 E. Broad St

City: Durham State: NC Zip: 28334

Phone (if available): 910-237-4835 Fax: N/A

Email: 129coffeeboosters@gmail.com

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Applicant(s): Jade & Mary Jo Satterfield

Address: 611 N Park Ave

City: Durham State: NC Zip: 28334

Phone: 910-237-4835 Fax: \_\_\_\_\_

Email: wt.satterfield@gmail.com

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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: Wesley J. Satterfield Date: 05/10/2023  
(Applicant or Responsible Representative)

**Hours of Operation:**

Mon 7-3 Tues 7-3 Wed 7-3 Thurs 7-3 Fri 7-3 Sat 8-2 Sun Closed

**Number of Seats:** \_\_\_\_\_

**Facility total square feet:** \_\_\_\_\_

**Projected start date:** \_\_\_\_\_

**Type of Food Service:**

**Check all that apply**

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

- Sit down meals
- Take-out meals
- Catering

**Utensils:**

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

**Food delivery schedule** (per week): \_\_\_\_\_

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

**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: \_\_\_\_\_ gallons

• Electric water heater: \_\_\_\_\_ kilowatts (kW)

\* • Gas water heater: \_\_\_\_\_ BTU's

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

\* If tankless, 11.2 GPM ; Number of heaters: 1

**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.	US Foods	2
2.	Webstaurant Store	1
3.	_____	_____
4.	_____	_____

**Time/Temperature Control for Food Safety**

Foods that will be held hot before serving: Soups purchased from local restaurants and vendors will be kept covered and warm on hot plates. No soups will be softener for consumption on another day.

Foods that will be held cold before serving: Fruits, vegetables, and pre-cooked meats will be stored appropriately in commercial refrigerator/freezer.

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: N/A

Describe utensils and methods used to cool foods: N/A

**Dry Storage**

Frequency of deliveries per week: \_\_\_\_\_ Number of dry storage shelves: 8

Square feet shelf space: 64 ft<sup>2</sup>

Is a separate room designated for dry storage? No

**Food Preparation Facilities**

Number of food prep sinks: 1 Are separate sinks provided for vegetables and raw meats? N/A (no raw meats), 1 prep sink for vegetables

Size of sink drain boards (inches): 18 x 18 x 14"

How will sinks be sanitized after use or between meat species? Sinks will be sanitized using hot water and disinfectant solution.



**Dishwashing Facilities**

**Manual Dishwashing**

Number of sink compartments: 3

Size of sink compartments (inches): Length 10" Width 14" Depth 10"

Length of drain boards (inches): Right 12" Left 12"

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: Auto Chlor Single Rack

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?

Remove food from the surface, Wash the surface, Rinse the surface, Sanitize the surface with a sanitizing solution, Allow to air dry

How many air drying shelves will you have? 2

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: 4 - one behind

the bar, one in the kitchen area, one in each of the 2 restrooms

**Employee Area**

Indicate location for storing employees' personal items: Closet located

at the rear of the building

### Finish Schedule

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

AREA	FLOOR	BASE	WALLS	CEILING
Kitchen	LVP	Concrete floor Sheetrock walls	FRP	Open rafters
Bar	LVP	Concrete	Treated Concrete/Brick	↓
Food Storage	LVP	Concrete floor Sheetrock	FRP	
Dry Storage	LVP	Concrete floor Sheetrock	FRP	
Toilet Rooms	LVP	Concrete floor Sheetrock	Sheetrock Paneling	Sheetrock
Garbage & Can Wash Areas	LVP	Concrete	Treated Concrete/Brick	Open rafters
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 at the rear of property

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? \_\_\_\_\_

How will used grease be handled? N/A

Is there a contract for grease trap cleaning? N/A

Are doors self-closing? Yes Fly fans provided? \_\_\_\_\_

Where will chemicals be stored? few in the designated cleaning closet

Where will clean linen be stored? Dry storage shelves under bar

Where will dirty linen be stored? \_\_\_\_\_

## 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 Lavage, Bacon, Ham

All meats arrive pre-cooked and frozen  
stored in commercial freezer  
Prepped on stainless steel prep tables that are properly  
sanitized  
No food will be used as leftovers or ingredients future  
dish

### FOOD PRODUCT Fruits, Vegetables

Purchased locally and fresh  
stored in commercial refrigerator  
Cleaned and prepped separately from pre-cooked meats in  
accordance with health and safety standards.

FOOD PRODUCT Breads and baked goods

Purchased from local bakery

Stored in dry storage and glass display cases

FOOD PRODUCT Goods that do not need refrigerating or freezing

Dry storage shelves dedicated for these items only

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

\*\*\* ADDITIONAL SHEETS ARE AVAILABLE