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 https://ehs.dph.ncdhhs.gov/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. 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
9	A proposed menu
0	A completed Food Service Plan Review Application
9	\$250 Plan Review Fee

07/23 gv

Food Service Plan Review Application

Type of plan: New Remodel					
Name of Establishment: B+B Catering, Inc. Physical Address: 697 Bethel Baptist Rol					
City: Sorthy Lake State: NC Zip: 28390					
Phone (if available): 910 - 476-4333 Fax:					
Email:					
Applicant(s): William Panhoff					
Address: 797 Bethel Bastist Road					
City: Socilia Lalce State: NC Zip: 28390					
Phone: 910-476-4333 Fax:					
Email:					
Owner (if different from Applicant):					
Address:					
City:					
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.					
1/28					
Signature: Date: 9//					
(Applicant of Responsible Representative)					

Hours of Operation: Monday - Saturding / Hours Var	- 4				
Mon Tues Wed Thurs Fri Sat Sun					
Number of Seats:	D				
Type of Food Service: Check all that apply					
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 week): As Neeles					
Indicate any specialized process that will take place: None 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: Rheem Tankless Outdoor Gas Water Heat				
Storage Capacity: gallons (Papere)				
Electric water heater:N/A kilowatts (kW)				
Gas water heater: 19,000 BTU's				
Water heater recovery rate: 92 GPH				
If tankless, IN, vw GPM; Number of heaters:				

Person in Charge (PIC) and Employee Health

1. 2.

3.

accredited by an approved ANSI program?							
Eligible Person In Charge: William (Bill) Panhoff							
Program Serv Safe	_ Cert. # <u>211120</u>	673 Exp.	Date 10 /7 /2024				
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					
US Foods			_				
- Son's		N/A	-				
- Frod Loba		N/A	-				

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? ______ S 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 Describe utensils and methods used to cool foods: **Dry Storage** Frequency of deliveries per week: Number of dry storage shelves: Square feet shelf space: 100 ft2 Is a separate room designated for dry storage? _______ **Food Preparation Facilities** Number of food prep sinks: ____ Are separate sinks provided for vegetables and raw How will sinks be sanitized after use or between meat species? Smitizer Will Systems - Ecolo

Dishwashing Facilities Manual Dishwashing Number of sink compartments: Size of sink compartments (inches): Length 30" Width 29" Depth 10 1/2" Length of drain boards (inches): Right ルゲェンリ Left しん x 2リ" Are the basins large enough to immerse your largest utensil? $\sqrt{e \zeta}$ 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: AF - 3D or chemical sanitizing? Hot water 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? Son itizer Bottles and Son itizer Buckets How many air drying shelves will you have? _____ Calculate the square feet of total air drying space: _____ | 20 Hand washing Indicate number and locations of hand sinks in the establishment: **Employee Area** Indicate location for storing employees' personal items: Locker located outside of restroom

Finish Schedule *Floor, wall and ceiling finishes (vinyl tile, acoustic tile, vinyl baseboards, FRP, etc.) WALLS CEILING **FLOOR** BASE AREA Sealed Acrylic Erand Acmic Enance Acratic Eranel over Cinder B Kitchen Bar Acrylic Epanel Acrybic Erane Food Storage Concrete over Conder Block Dry Storage Acrylic Enamel Acrylic Enamel Acryliz Enan " over Sheetrock over Sheatra **Toilet Rooms** ver Sheetrode Garbage & Can Conderblock 11 Wash Areas Acrylia Ename N/A 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: 600000 6' 14" Are hot and cold water provided as well as a threaded nozzle? Do you have a contract with the dumpster provider for cleaning? How will used grease be handled? Is there a contract for grease trap cleaning? Fly fans provided? Are doors self-closing? Where will chemicals be stored? Outside Ward S Where will clean linen be stored?

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 <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 Produce
Produce upon arrival will be washed in washing sink trinsed, shocked and placed in sice bath with salt for five minutes, the or drained and placed into drain lexans. Then placed in coolor.
FOOD PRODUCT Sca foo
Sea food will be wrapped, shocked in icebath the placed lin drain lexan with ice or bottom then layer of food service film. Then will lay lown and be covered with film again then ice has will be placed atop and then will be placed in walk-in cooler.

FOOD PRODUCT_	Pork /	Red	Meat	
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with a co	for codes	Knite	<u>'</u>	
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***ADDITIONAL SHEETS ARE AVAILABLE