

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

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: Central Permitting, 420 McKinney Pkwy., Lillington, NC 27546

If you have questions, please contact an Registered Environmental Health Specialist staff at 910-893-7547:

Plans must be submitted with the following supporting documentation:

- A proposed menu
- A completed Food Service Plan Review Application/Change of Ownership
- A site plan drawn to scale showing the placement of each piece of food service equipment, storage areas, trash can wash facilities, etc.

08/22

gv

## Food Service Plan Review Application

Name of Establishment: Tak Fong Chen NO.1 Restaurant at Lillington  
Physical Address: 6524 Draycott Rd 20 the Square At  
City: Fayetteville Lillington State: NC Zip: 28311 27546  
Phone (if available): 917-355-8098 Fax: \_\_\_\_\_  
Email: Mike chen 60 @ G mail . com

Applicant: Tak Fong Chen  
Address: 6524 Draycott Rd  
City: Fayetteville State: NC Zip: 28311  
Phone: 917-355-8098 Fax: \_\_\_\_\_  
Email: Mike chen 60 @ Gmail . com

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: Tak Fong Chen Date: 9/22/2023  
(Applicant or Responsible Representative)

**Hours of Operation:**

Mon \_\_\_ - \_\_\_ Tues 10-00 Wed 10-00 Thurs 10-00 Fri 10-30 Sat 10-30 Sun 10-00

Number of Seats: 138

Facility total square feet: 3000

Projected start date: 9/22/2023

**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): X Single-use (disposable): \_\_\_\_\_

Food delivery schedule (per week): 3 times

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: ~~Rheem~~ RL94 NO 42V75F / Rinnai ~~RL940~~

Storage Capacity: \_\_\_\_\_ gallons

- Electric water heater: \_\_\_\_\_ kilowatts (kW)
- Gas water heater: 75,100 BTU's / 199,100

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? 0655

Eligible Person In Charge: Yun YAN LIN

Program ServSafe Cert. # 24084848 Exp. Date 6/7/2028

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

Eligible Person In Charge: MIN FANG REN

Program Serv Cert. # 18841447 Exp. Date 1/19/2025

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

Program ~~Serv~~ 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. | <u>Han Feng Food</u>       | <u>1 time</u> |
| 2. | <u>Alliance Food Group</u> | <u>1 time</u> |
| 3. | <u>G.D Seafood Inc</u>     | <u>1 time</u> |
| 4. | _____                      | _____         |

**Time/Temperature Control for Food Safety**

Cooked Food

Foods that will be held **hot** before serving: 145 °F or about 145 °F

Crab Rangoon, Teriyaki chicken, Spring Roll, Corn on the cob, Fried fish, chicken nuggets, Butter Potato, Onion Ring, Donut, Egg Roll, General chicken, Beef Brodic, Mix veg shrimp, Fried Rice, Lamei, White Rice, Rice Noodle, String Bean, Chicken Bun, Salmon, Mac cheese, Black Pepper chicken, Garlic bread, Bun, Shrimp, Honey chicken, Chicken Drumstick, wing.

Foods that will be held **cold** before serving: - 41 °F, cold storage Egg.

Pudding, All kinds Dressing.

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: 4

Square feet shelf space: 6 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? Yes.

Size of sink drain boards (inches): 60 x 30.

How will sinks be sanitized after use or between meat species? After sink  
So we soap the sinks and rinse. After sanitiner.  
We go ahead prepare the foods.

**Dishwashing Facilities**

**Manual Dishwashing**

Number of sink compartments: 3

Size of sink compartments (inches): Length 76 Width 30 Depth \_\_\_\_\_

Length of drain boards (inches): Right 4 Left 4

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: Zealab 208V

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? ~~Using soap and water~~

We used the soap and cleaning, and then Rinse. Then used the Sanitizer, and let it air dry

How many air drying shelves will you have? 2

Calculate the square feet of total air drying space: 6 ft<sup>2</sup>

**Hand washing**

Indicate number and locations of hand sinks in the establishment: 3 Hand Sink.

two ~~sinks~~ in the kitchen, one in the Dining Room. ~~One~~

**Employee Area**

Indicate location for storing employees' personal items: Kitchen (by the back door)

~~Bathroom~~

**Garbage, Refuse and Other**

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

Location and size of can wash facility: ~~None~~ ~~Sink~~ In the Back of Postaire. Mop Sink.

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? NO.

How will used grease be handled? In the grease tank.

Is there a contract for grease trap cleaning? NO.

Are doors self-closing? NO. <sup>NO in the back door.</sup> Fly fans provided? NO.

Where will chemicals be stored? under the sink.

Where will clean linen be stored? under the sink.

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** Chicken. Beef. Shrimp. ~~French~~ Fries.  
Come with Frozen. And we put in the freezer

**FOOD PRODUCT** paper, pack same. Dry stuff we will  
store in the dry storage place

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

All the cut the vegie. Open Bag food.  
We will put the stick on And put the time  
We prepare

**FOOD PRODUCT** For the prepare food. We have  
a vegie sink. And meat sink. That is where  
we wash them at.

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

**\*\*\*ADDITIONAL SHEETS ARE AVAILABLE**



















