

2-27-24
**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: Ishawi INC, DBA T-Mart
Physical Address: 800 West Cumberland St
City: Dunn State: NC Zip: 28334
Phone (if available): 910-292-2111 Fax: _____
Email: dorella.davis30@yahoo.com

Applicant: Kruti Patel
Address: Same as Above
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Email: _____

Owner (if different from Applicant): Kruti Patel
Address: _____
City: Same as Above 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: Kruti Patel Date: 2/27/2024
(Applicant or Responsible Representative)

Hours of Operation:

Mon 5-9 Tues 5-9 Wed 5-9 Thurs 5-9 Fri 5-9 Sat 5-9 Sun X-X

Number of Seats: 12

Facility total square feet: 3800

Projected start date: _____

Type of Food Service:

- Restaurant
- Food Stand
- Drink Stand
- Commissary
- Meat Market
- Other (explain): Convenience store / grill

Check all that apply

- Sit down meals
- Take-out meals
- Catering

Utensils:

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

Food delivery schedule (per week): Two

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 82V80-2

Storage Capacity: 87 gal gallons

- Electric water heater: 240/208 kilowatts (kW)
- Gas water heater: _____ BTU's

Water heater recovery rate: _____ GPH

If tankless, _____ 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? Yes

Eligible Person In Charge: Donald Addison
Program ANSI Cert. # 23239264 Exp. Date 10/30/28

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

Eligible Person In Charge: Betty West
Program ANSI Cert. # 20398248 Exp. Date 3/29/26

Eligible Person In Charge: Stefanie Gozales
Program ANSI Cert. # 5709184 Exp. Date 6/26/25

*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>US Foods</u>	<u>1</u>
2. <u>Performance Foods</u>	<u>1</u>
3. _____	_____
4. _____	_____

Time/Temperature Control for Food Safety

Foods that will be held hot before serving: Once food is cooked
goes straight to heating cabinet

Foods that will be held cold before serving: Slaw

Will time be used as a method to control for food safety? _____
Will a buffet be provided? No 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: Vegetables - that will be used
in vegetable soup

Describe utensils and methods used to cool foods: Ice baths

Dry Storage

Frequency of deliveries per week: 2 Number of dry storage shelves: 5

Square feet shelf space: _____ ft²

Is a separate room designated for dry storage? Yes

Food Preparation Facilities

Number of food prep sinks: 1 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? Sanitize Solution

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? Sanitizer Solution

How many air drying shelves will you have? 2

Calculate the square feet of total air drying space: _____ ft²

Hand washing

Indicate number and locations of hand sinks in the establishment: 1

Employee Area

Indicate location for storing employees' personal items: Specified Shelving

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: 3x3 Cement basin

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? Republic Waste

How will used grease be handled? Enviro Sense

Is there a contract for grease trap cleaning? YES

Are doors self-closing? yes Fly fans provided? yes

Where will chemicals be stored? Chemical Shelves provided

Where will clean linen be stored? Shelving provided

Where will dirty linen be stored? Hamper BAG provided

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 Delivered Fresh Stored in Walkin cooler

FOOD PRODUCT Liver/Gizzard Delivered Fresh Stored in walk in cooler

FOOD PRODUCT Eggs - Milk - Cheese Delivered twice
WEEK Kept in walk in cooler

FOOD PRODUCT Canned Vegetables Stored in
dry Room

FOOD PRODUCT Breakfast meats

Fillet
Sausage
Ham
Tenderloin
Beef Steak
Red Hot
Link Sausage
Salami

Arrives Frozen Kept in Freezer

***ADDITIONAL SHEETS ARE AVAILABLE

FOOD PRODUCT Corn Dog

Hot Dog

Pizza Stick

Egg Rolls

delivered Frozen Kept in

Freezer

FOOD PRODUCT Flour - Lard - Breading

Stored in Dry Area

FOOD PRODUCT _____

***ADDITIONAL SHEETS ARE AVAILABLE

FOOD PRODUCT Brussel sprout

Corn

Lima BEAN

Corn on cobs

Collards

Brucelli

Delivered Frozen kept in Freezer

FOOD PRODUCT _____

FOOD PRODUCT _____

*** ADDITIONAL SHEETS ARE AVAILABLE