HARNETT COUNTY MOBILE FOOD UNIT PLAN REVIEW APPLICATION

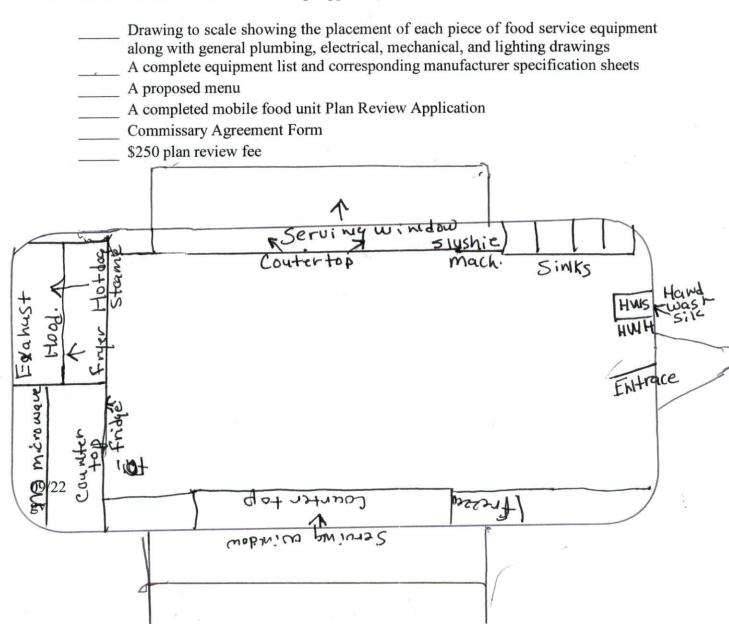
		Concession		
Owner's Name:	Sylvester	King		
Owner's Address:	P.O BOX 1868	. Parkerlan	we /illinigtow , Zip Code: 27546	nc
	City: Lilinia	tow_	Zip Code: 27546	·
Mailing Address (if different)	PO. BOX 1	808	B. 0.1.1.1	
n	City: Lilli	nigtow	Zip Code: WC	
Phone if Available: QLO)-(40L-1	/ 6 6 0) Fax:	()-(
E-mail Address:	******	*****	******	******
Name of Commissary:	Fich FRU	Co	ntact: Anaelo	
Name of Commissary: Commissary's Address:	100\$ 5.ma	ain st		
	City: Lilling +	on	Zip Code: NC	
Commissary's ID#:				
Telephone: $(910)-($	893-947	6 Fax: (_)-()
E-mail Address:				
**********	******	******	********	******
Hours Operation:				
Sun. <u>MO</u> Mon. <u>NO</u>	Tue. NO We	ed. NO Thu.	<i>NO</i> Fri. <i>NO</i>	Sat
Total Square Feet of MFU:	14×7			
Projected Number of Meals to	be Served: (appro	oximate number)		
Breakfast NA Lun	ch NA	Dinner NIA	-	
Projected Date for Start of Op	peration:			
County(s) in which MFU will		vett		
Water tank capacity: 25 9				
Waste water tank capacity:	- 1		ast 15% larger than wa	
********	*******	******	******	*****
Please enclose the following			j	
Proposed menu items. (Include	ling seasonal varia	tions in the menu)		
Manufacturer specification sh	-			
Diagram of the MFU, to scale	with all equipmen	nt labeled, water tan	iks identified.	
Commissary Agreement Forn	n.			
Food Handling Procedure Wo	orksheets			
I certify that the information	on in this application	on is correct, and I u	inderstand that any dev	viation without prior
ap	proyal from this D	epartment may null	lify plan approval.	
Signature: (App	Sylvetto Dicapit or Responsi	ible Representative)	Date: 5-6-202	4_

Harnett County Plan Review Application for Mobile Food Units

Plans are reviewed using North Carolina's "Rules Governing the Sanitation of Food Service Establishments," 15A NCAC 18A .2600. You may view these rules at https://ehs.dph.ncdhhs.gov/rules.htm or obtain a copy from our office at 307 West Cornelius Harnett Boulevard, Lillington, NC 27546.

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

Plans must be submitted with the following supporting documentation:



Harnett Commissary Agreement Form

As the permittee or operator of the restaurant facility noted below, it is my intention to allow this facility to serve as a commissary for the mobile food unit or push cart noted below. I understand that as a commissary for the mobile food unit or push cart, I must allow the mobile food unit or push cart to return for servicing on a daily basis. I understand that servicing the unit may include any and all of the servicing requirements noted below. I also agree to report to the Health Department if a mobile food unit or pushcart fails to return daily during operation. I agree to allow my restaurant to be used for the following:

-	se of the restaurant ute ensils.	ensil sink for washing of mobile food ur	nt or push cart
MO Do	esignated areas for reflood storage for the mo	rigerated products, utensil air drying an bile food unit or pushcart.	d storage, and dry
A Er	sanitary connection to nvironmental Health S	the potable water supply as approved pecialist (if applicable).	oy the
—— Н	ealth Specialist (if app		
Name of Mobile	Unit or Push Cart 4	push card Sylvester King	
Owner/Operator	of mobile food unit or	push care Sylvester Kine	<u>'</u>
Name and Addre	ss, of Restaurant Servi	ng as Commissary:	
7ish	try		
100	15 main S	<u> </u>	
1.	Mington		**
Signature of Restaur	ant Permittee or Operator	Print Name	Date
Harnett County	Environmental Serv	rices Use Only	
Commissary App	proved By	vironmental Health Specialist	
	Env	vironinentai ricattii Specianst	
Date			

2/11

Mobile food unit/Push cart Log

Unit Name: 8 4-5	season Conce	ession
Owner Name: Sylv	ester Kinci	ef
Commissary Name: +;	sh Fry	
Commissary Owner: A		a a
		nobile food units(stated in part)
(f) Pushcarts of m	nobile food units shall o	operate in conjunction with a permitted restaurant or commissary
and shall report a	t least daily to the restar	urant or commissary for supplies, cleaning, and servicing.
Data	Time In	Commission Varification Simulation
Date	Time In	Commissary Verification Signature
-		
,	3	
-		*
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	N200	

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.

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 _				
Hot Dogs.	fridge d	- Frezzer		
				1
FOOD PRODUCT	Funnel -ca	Ke- Ice SI	ushies	
Popcorni	- Drinks	Bottle u	vater	
5				
				ž.

DISHWASHING FACILITIES <u>AT COMMISSARY</u>
Number of sink compartments:
Size of sink compartments (inches): Length Width Depth
Length of drainboards (inches): Right Left
What type of sanitizer will be used?
Chlorine Quaternary ammonium Hot water Other (specify)
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?
How many air drying shelves will you have? W/A
How many air drying shelves will you have?
HANDWASHING
Indicate number and locations of hand sinks on MFU:
Indicate location for storing employees' personal items on MFU: NO Storing personal Theam
GARBAGE, REFUSE AND OTHER
Will trash be stored in the MFU overnight? Yes No If so, how will it be stored to prevent contamination?
Where will MFU be stored after operation? Home
Location and size of can wash facility at Commissary:
Is can wash area accessible to MFU?
Are hot and cold water provided as well as a threaded nozzle?
How will used grease be handled?
Are doors on MFU self-closing? <u>NO</u> Fly fans provided? <u>yes</u> Where will chemicals be stored? <u>Benigth</u> Cabinet
Where will chemicals be stored? Benigth Cabinet
Where will clean linen be stored?
Where will dirty linen be stored? IN a pail