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, staff at 910-893-7547: | please contact | Johnson | Central Pe | muttur |
|---|----------------|---------|------------|--------|
| | | | 814-18 | 16431 |
| | | | | |

Plans must be submitted with the following supporting documentation:

X A proposed menu

X 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: TACO | S PLACEROS E | L GALLARDO | |
|-----------------------------------|--------------------|----------------------------------|---------|
| Physical Address: 61 W WILLIA | AMS ST | | _ |
| City: ANGIER | State: NC | Zip: <u>27501</u> | |
| Phone (if available): | Fax: | : | |
| Email: tacosplaceroselgallardo | | | |
| | | | |
| Applicant: OBET GALLARDO | /AZQUEZ | <u> </u> | |
| Address: 103 EWING DR | | | |
| City: ANGIER | | | |
| Phone: (919) 523-3017 | | | |
| Email: tacosplaceroselgallardo | | | |
| | | | |
| Owner (if different from Applicar | nt): | | |
| Address: | | | |
| City: | | | |
| Phone: | Fax: | | _ |
| Email: | | | |
| | | | |
| | | | |
| I certify that the information in | n this application | n is correct, and I understand t | hat any |
| deviation without prior appre | oval from this De | epartment may nullify plan app | roval. |
| | | | |
| Signature: Obet Gar | llardo V. | Date:10/18/2024 | |
| (Applicant or Re | sponsible Repre | esentative) | |

| Hours of Operation: | |
|---|---|
| Mon <u>11-10</u> Tues <u>11-10</u> Wed <u>11-10</u> Thurs <u>1</u> | <u>1-10</u> Fri <u>11-10</u> Sat <u>11-10</u> Sun <u>11-9</u> |
| Number of Seats: | |
| Facility total square feet: 973.20 sq ft | × . |
| Projected start date: | _ |
| • | |
| Type of Food Service: | Check all that apply |
| _X_ Restaurant | Sit down meals |
| Food Stand | X_ Take-out meals |
| Drink Stand | Catering |
| Commissary | |
| Meat Market | |
| Other (explain): | |
| | |
| Utensils: | |
| Multi-use (reusable):X | Single-use (disposable):X |
| Food delivery schedule (per week): 2 | |
| Indicate any specialized process that will | take place: |
| N/A Curing N/A Acidification (sushi, | |
| N/A Reduced Oxygen Packaging (e.g. va | acuum packaging, sous vide, cook-chill, etc.) |
| Has the process been approved by the Var Protection Branch? <u>N/A</u> | iance Committee of the DPH Food |
| served: | otible populations that will be catered to or |
| N/A Nursing/Rest Home N/A Child | |
| | nool with pre-school aged children or an |

| Water Supply: | |
|---|----------------|
| /pe 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: NAVIEN-NFC-250/200H | |
| Storage Capacity: gallons | |
| Electric water heater: | kilowatts (kW) |
| Gas water heater: 210,000 | 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: OBET GALLARDO VAZQUEZ Program <u>SERVSAFE</u> Cert. # <u>21880623</u> Exp. Date <u>03/22/2027</u> For multiple shifts and/or occasions of absences, list all eligible Persons in Charge: Eligible Person In Charge: LAURA CUAUTLE REYES Program <u>SERVSAFE</u> Cert. # <u>26394393</u> Exp. Date <u>10/20/2029</u> 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? NO **Food Sources** Deliveries/wk Names of food distributors: 1. RESTAURAN DEPOT SAMS CLUB 3. COMPARE FOOD

| Time/Temperature Control for Food Safety |
|---|
| Foods that will be held hot before serving: Rice and black beans |
| |
| |
| Foods that will be held cold before serving: Vegtables, poultry, meat, cheese, ham and sauces |
| Will a buffet be provided? N/A If so attach a list of foods that will be an the buffet |
| Will a buffet be provided? N/A 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:1 Number of dry storage shelves: _2 Square feet shelf space: 8*15 ft² |
| s a separate room designated for dry storage?NO |
| Food Preparation Facilities |
| Number of food prep sinks: 2 Are separate sinks provided for vegetables and meats? YES Size of sink drain boards (inches): 17*17*12 |
| How will sinks be sanitized after use or between meat species? |
| The residue is then removed and washed with soap and rinsed with hot water and |
| finally the sanitizer is applied and allowed to dry. |
| |

Dishwashing Facilities

Manual Dishwashing

| Number of sink compartments:3 | |
|---|--|
| Size of sink compartments (inches): Length 18 Width 24 Depth 14 | |
| Length of drain boards (inches): Right 24 Left 24 | |
| Are the basins large enough to immerse your largest utensil? YES | |
| What type of sanitizer will be used? | |
| Chlorine Quaternary _X Hot water (171°F) Other (specify) | |
| | |
| Mechanical Dishwashing | |
| Will a dishmachine be used? Yes No X | |
| 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? | |
| The residue is then removed and washed with soap and rinsed with hot water and | |
| finally the sanitizer is applied and allowed to dry. | |
| How many air drying shelves will you have?1 Calculate the square feet of total air drying space:48*18ft² | |
| Hand washing | |
| Indicate number and locations of hand sinks in the establishment: One hand sink and | |
| It is to the right of the kitchen. | |
| | |

| 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: Out site the building and size is 36*24 | | |
| 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? YES | | |
| How will used grease be handled?YES | | |
| Is there a contract for grease trap cleaning?YES | | |
| Are doors self-closing? YES Fly fans provided? NO | | |
| Where will chemicals be stored? Under the sink compartments | | |
| Where will clean linen be stored? In dry storage | | |
| Where will dirty linen be stored? Out site the building. | | |

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 Rice and black beans will be purchased at Restaurant Depot or Sams

| and stored in dry storage. Rice and black beans will be cooked on the stove separately and then placed in the steam table at a temperature no lower than 135°F. | | | | |
|--|--|--|--|--|
| The rice preparation will be daily and the leftover rice will be thrown out. | | | | |
| The preparation of the beans will be daily and the leftovers of the day will be put into shallow pan to leave it in the refrigerator to reach the temperature of 41°F the next day the temperature will be taken to verify that it is at 41°F or less to be heated in a pot on the stove so that it reaches 165°F to be put into the steam table at a temperature not less than 135°F. | | | | |
| FOOD PRODUCT Poultry | | | | |
| FOOD PRODUCT Poultry | | | | |
| Chicken will be purchased from Restaurant Depot or Sams. It will be stored directly in the freezer at 0°F or below and thawed in the refrigerator at 41°F or below. A part of the chicken will be portioned in the prep sink and placed in the refrigerator at 41°F or below | | | | |
| for no more than seven days. It will be roasted for 8 to 15 minutes at 360°F and delivered to the customer at a temperature no lower than 165°F. | | | | |
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| FOOD PRODUCT Mealt |
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| |
| The beef and pork will be purchased from Restaurant Depot or Sams. They will be stored in the freezer at 0°F or below and thawed in the refrigerator at 41°F or below. A part of the |
| beef and pork will be portioned in the prep sink and placed in the refrigerator at 41°F or below |
| for no more than seven days. It will be roasted for 8 to 15 minutes at 360°F. |
| |
| The ham will be purchased from Restaurant Depot or Sams. They will be stored in the sandwich prep table at 41°F or below for no more than seven days. |
| salidwich prep table at 41 F of below for no more than seven days. |
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| FOOD PRODUCT Vegetales |
| vegetales vegetales |
| Cilantro, red pepper, green pepper, lettuce, avocado, onions, chilis pepers (red and green) |
| will be purchased from Restaurant Depot or Sams. They will be stored in the refrigerator. |
| at 41°F or below. A portion of each item will be chopped in the prep sink to be portioned |
| and placed in the sandwich prep table at 41°F or below for no more than seven days. |
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| FOOD PRODUCT _ Tortillas and bread |
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| The tortillas and bread will be purchased from Restaurant Depot or Sams. They will be stored |
| in the shelve at ambiental temperature. |
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***ADDITIONAL SHEETS ARE AVAILABLE