## 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 <a href="https://ehs.dph.ncdhhs.gov/rules.htm">https://ehs.dph.ncdhhs.gov/rules.htm</a>. Plans must be submitted for approval <a href="prior to">prior to</a> 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:

nust 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
A proposed menu
A completed Food Service Plan Review Application
\$250 Plan Review Fee

2024

### Food Service Plan Review Application

Type of plan: New Remodel
Name of Establishment: Parker 5 Pizza
Physical Address: 691 Seminale Rd
City: Brownian State: NC Zip: 27505
Phone (if available): Fax:
Email:
Applicant(s): William Parker  Address: 554 McNeill Mill Rd  City: Broadward State: NC Zip: 27505  Phone: 910-391-8536 Fax:  Email: Peanut Parker 72 Cyahoo. Com
Owner (if different from Applicant): Wendy Parker
Address: 554 McNeill Mill Rd
City: Broadway State: NC Zip: 27505
Phone: 919-896-2639 Fax:
Email: Wendythodes 17@ qmail. com
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.
With the
Signature: Date: 3-31-25 (Applicant of Responsible Representative)

Hours of Operation:	
Mon [8_ Tues <u>                                    </u>	Fri 11 - 9 Sat 11 - 9 Sun 3 - 8
Number of Seats: 🔱	
Facility total square feet: 1500 Projected start date: 1500	
Type of Food Service:	Check all that apply
X Restaurant	X_ Sit down meals
Food Stand	X_ Take-out meals
Drink Stand	Catering
Commissary	Catering delivery
Meat Market	,
Other (explain):	_
Utensils:	
Multi-use (reusable): Sing	gle-use (disposable):
Food delivery schedule (per week): ONCE	
,	
Indicate any <b>specialized process</b> that will take Curing Acidification (sushi, etc.)	
Reduced Oxygen Packaging (e.g. vacuui	
Has the process been approved by the Variance Protection Branch?	
Indicate any of the following <b>highly susceptible</b> served: We will deliver to	e populations that will be catered to or
Nursing/Rest Home Child Care	CenterHealth Care Facility
	with pre-school aged children or an inocompromised 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)  Ves No
Wastewater System:
Type of wastewater system: (check one)  Public sewer  On-site septic system
Water Heater:
Manufacturer and Model: US/CraSt n Oster Water Neates  Storage Capacity: 40 gallons #E2F40RD0451
Electric water heater: 4500 kilowatts (kW)
Gas water heater: BTU's
Water heater recovery rate: 40/44 GPH
If tankless, GPM; Number of heaters:

### Person in Charge (PIC) and Employee Health

	Are Persons in Charge certified accredited by an approved ANSI	food protection man program? [Je w	agers who have pas I have this	ssed a test
	Eligible Person In Charge:			
	Program	_ Cert. #	Exp. Date	e
	For multiple shifts and/or occasion	ons of absences, lis	all eligible Persons	s in Charge:
	Eligible Person In Charge:			
	Program	_ Cert. #	Exp. Date	9
	Eligible Person In Charge:			
	Program	_ Cert. #	Exp. Date	·
	*Attach a copy of your establishr	ment's Employee He	ealth Policy	
	Are copies of signed Employee I	Health Policies on fi	estre go vot	have yet!
	Food Sources			
	Names of food distributors:		Deliveries/wk	
1.	terformance foods			
2.	Ferrero foods			
3.				
1				

Time/Temperature Control for Food Safety
Foods that will be held hot before serving: Pizza, Wings, hot Subs
Foods that will be held <b>cold</b> before serving: Cold 5065
Will <b>time</b> be used as a method to control for food safety? <u>LCS</u> Will a buffet be provided? <u>NO</u> 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:
; <del></del>
Describe utensils and methods used to cool foods:  Wark in Cooler
Dry Storage
Frequency of deliveries per week: Number of dry storage shelves:
Square feet shelf space: 72 ft <sup>2</sup>
Is a separate room designated for dry storage?
Food Preparation Facilities
Number of food prep sinks: Are separate sinks provided for vegetables and raw meats? No raw meat Size of sink drain boards (inches):
How will sinks be sanitized after use or between meat species?

# Dishwashing Facilities Manual Dishwashing Number of sink compartments: Size of sink compartments (inches): Length 18 Width 24 Depth 14 Length of drain boards (inches): Right Left Are the basins large enough to immerse your largest utensil? \_\_\_\_\_ What type of sanitizer will be used? Chlorine \_\_\_\_ Quaternary \_\_\_ 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? Cleaned with hot soapy water How many air drying shelves will you have? Calculate the square feet of total air drying space: Hand washing Indicate number and locations of hand sinks in the establishment: Lin the bathrood + lin the Kitchen

Indicate location for storing employees' personal items:

**Employee Area** 

#### Finish Schedule

Garbage, Refuse and Other

\*Floor, wall and ceiling finishes (vinyl tile, acoustic tile, vinyl baseboards, FRP, etc.)

AREA	FLOOR	BASE	WALLS	CEILING
Kitchen	tile	Baseboard	Cinder block	Ceiling tile
Bar				
Food Storage	tile	Baseboard	Walk in Cooler	Ceiling tile
Dry Storage	tile	Baseboard	Sheet Rook	Sheet Rock
Toilet Rooms	tile	Baseboard	Paneling Sheet Rock	Ceiling tile
Garbage & Can Wash Areas	tile		Cinder Block	1
Other				· ·
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. Back of restaurant Near Wash room 6x6
Are hot and cold water provided as well as a threaded nozzle?
Will a dumpster be provided? <u>Les</u>
Do you have a contract with the dumpster provider for cleaning? <u>ues</u>

Is there a contract for grease trap cleaning? \_\_No Are doors self-closing? <u>Les</u> Fly fans provided? <u>No</u>

Where will chemicals be stored? <u>Can Wash</u> <u>Closest</u>

Where will clean linen be stored? Under Courter

How will used grease be handled? No grease

Where will dirty linen be stored? Dirty Lines

#### 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 Pizza
Pepperoni, ham, beef, Sausane, baron, Green peppers, onions, mushrooms, Jalaperos, olives, pineapple All product will be bought in and wrapped it will be prepartaged and kept in a cooler
All product will be bought in and wrapped it will
be preparkaged and kept in a cooler
FOOD PRODUCT 5065
Same as above.

FOOD PRODUCT Wings
. Same as above
FOOD PRODUCT Spagetti + Lasagna
Pte Parkaged
FOOD PRODUCT

<sup>\*\*\*</sup>ADDITIONAL SHEETS ARE AVAILABLE