

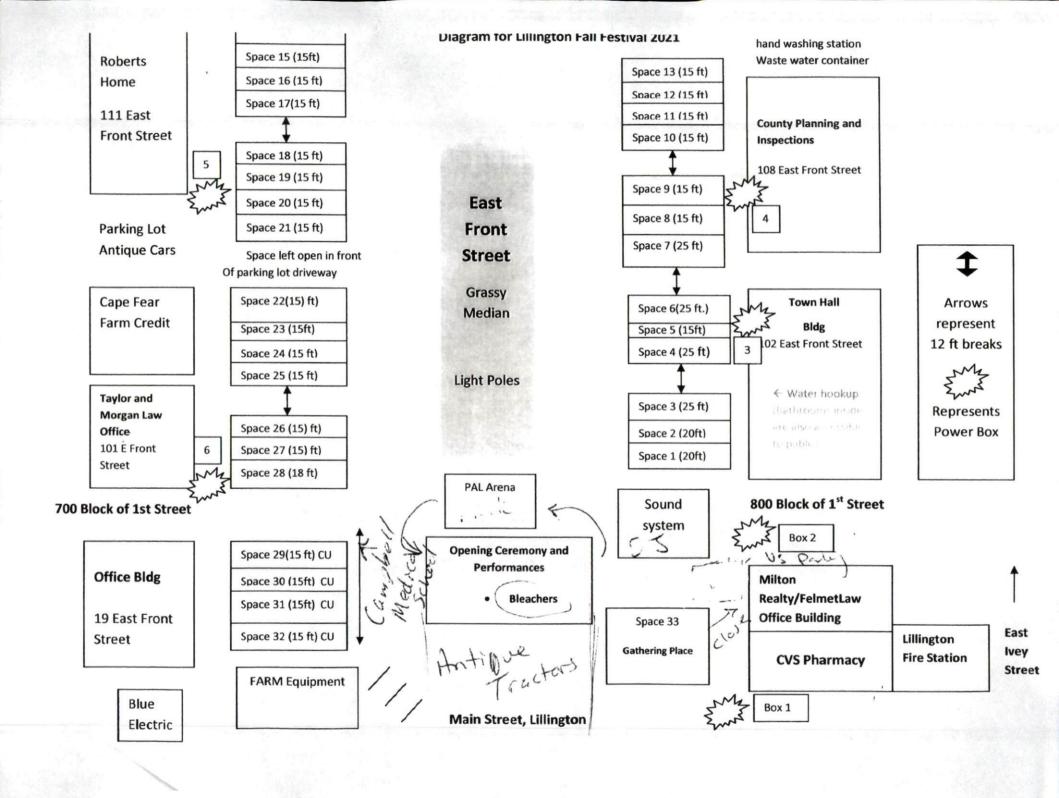


## **Application for Plan Review**

Application # FLEW Z S 4-22-25 Name of Project: Physical Address of Project: Plans Submitted By: Project Phone: Contact Person/Address: Contact Email: Contact Phone: Contractor's Name/Info: Contractor's Phone:

- Plans that are submitted will be reviewed as quickly as possible with an <u>average time of review</u> between 7-10 working days.
- Status checks may be conducted on plan reviews by visiting the website <a href="http://hteweb.harnett.org/Click2GovBP/Index.jsp">http://hteweb.harnett.org/Click2GovBP/Index.jsp</a> or by calling the Harnett County Central Permitting Office (910-893-7525, Option #2), or the Harnett County Fire Marshal's Office (910-893-7580).
- Approved plans must be picked up from the Central Permitting Office and all fees paid before any
  required inspections can be conducted.

> FOC	DD SERVICE INFORMATION
1. Will The	Event Provide Potable Water To Food Vendors? Yes ( ) No ()
If ye	s, what is the source of supply? VENDORS WILL HAVE OWN
2. Power S	upply (check all that apply):
•	Event will allow continuous access to electricity on site  Vendors are allowed to continuously run generators on site  There will be no electricity supplied on site
3. Liquid W	/aste / Grease Disposal:
[	Event will provide grey water / liquid waste receptacles on site  Vendors must collect and remove their own grey water / liquid waste  Event will provide grease receptacles on site  Vendors must collect and remove their own grease
4. Restroo	m Facilities: 2 HAND WASHING STATIONS
8	Public restrooms Number provided:    Portable toilets   Number provided: 35TANDARD , 1 ACA TOILET
	list of all proposed food vendors including for profits, non-profits and free food stands. ase include a contact name and phone number for each.
6. Attach a	sketch of the event grounds showing locations of the following:
	Food vendors Portable toilets Water hookup Liquid waste disposal
> STA	ATEMENT
1	certify the information I have provided in this application is complete and accurate. Understand that any deviation from approved plans without prior permission from Harnett County Environmental Health may nullify final approval and may prevent issuance of TFE permits to food vendors. I understand that a pre-opening inspection of each food vendor is required and if the food vendor is not in compliance with 15A NCAC 18A .2665 a temporary food establishment permit will not be issued.



## HARNETT COUNTY EVENT COORDINATOR APPLICATON

By providing the information below, you will assist in identifying and preventing potential public health problems that might occur during your event.

In addition to this Coordinator Application, a separate Temporary Food Establishment Permit Application must be submitted by each food vendor.

All applications (coordinator & vendor) & food vendor permit fees must be received by Harnett County Environmental Health, 307 W. Cornelius Harnett Blvd., Lillington, NC 27546 at least 15 calendar days prior to the event.

Phone: 910-893-7547

EVENT INFORMATION

2 EVERT IN ORMATION
NAME OF EVENT: CAPE FEAR FEST 2025
Location / Address of Event: INTORSECTION OF FRONTS TO STREST ST (NOAR CUL
Date(s) of Event: Starts on $05/03/2025$ (MM/DD/YY) at $900a.m$ , p.m. Ends on $0503/2025$ (MM/DD/YY) at $2.00a.m$ . p.m.
TYPE OF EVENT (Circle):
Fair Festival Carnival Public Exhibition Other
> EVENT COORDINATOR OR ORGANIZER
NAME OF COORDINATOR: LIWINGTON AREA HAMBON OF GIMMORIE YERAD OKINSON
Mailing Address: Box 67 City/State/Zip LI WIN GOW, NC 27546
Phone: Mobile (910) 5(50 (2) Home (-) 9(0 89 3 3751
Email Address: CITAMBOR @ LILLINGTON GHAMBOR- 0166

## FOOD SERVICE INFORMATION 1. Will The Event Provide Potable Water To Food Vendors? Yes ( ) If yes, what is the source of supply? VENDORS WILL HAVE DWN WATON 2. Power Supply (check all that apply): Event will allow continuous access to electricity on site Vendors are allowed to continuously run generators on site ☐ There will be no electricity supplied on site 3. Liquid Waste / Grease Disposal: Event will provide grey water / liquid waste receptacles on site Vendors must collect and remove their own grey water / liquid waste □ Event will provide grease receptacles on site Vendors must collect and remove their own grease 2 HAND WASHING STATIONS 4. Restroom Facilities: Public restrooms Number provided: Portable toilets Number provided: 35TANDARD, 1 ACA TOILET 5. Attach a list of all proposed food vendors including for profits, non-profits and free food stands. Please include a contact name and phone number for each. Attach a sketch of the event grounds showing locations of the following: Food vendors LEE ATTACKER Portable toilets Water hookup Liquid waste disposal STATEMENT I certify the information I have provided in this application is complete and accurate. I understand that any deviation from approved plans without prior permission from Harnett County Environmental Health may nullify final approval and may prevent issuance of TFE permits to food vendors. I understand that a pre-opening inspection

of each food vendor is required and if the food vendor is not in compliance with 15A NCAC 18A .2665 a temporary food establishment permit will not be issued.

