



Food Service Establishment Plan Review Application

New ____ Renovation ____

Water system:

Well ____ Municipal ____

Sewer system:

Onsite System ____ Municipal Sewer ____

County building permit number ____

Projected start date of construction: ____ Projected completion date: ____

Name of Establishment: ____

Address: ____ NC City: ____ Zip Code: ____

Phone: ____ - ____ - ____ Cell: ____ - ____ - ____

E-mail Address: ____

Name of Legal Ownership: ____

Type of Ownership: association, corporation, individual, partnership, or other legal entity:

Names and Titles of Persons in Legal Ownership: ____

Legal Ownership Address: ____

City: ____ State ____ Zip Code: ____

Phone: ____ - ____ - ____ Cell: ____ - ____ - ____

Name of Ownership Local Agent: ____

Local Agent Email Address: ____

Project Contact Person Name: ____

Contact Person Telephone: ____ - ____ - ____

Contact Person E-mail Address: ____

Name: ____

PLEASE PRINT

Signature: ____ Date: ____

(Owner or Responsible Representative)



TOE RIVER HEALTH DISTRICT
Avery & Mitchell County
Health Departments



Plan Review Application Checklist:

- ___ Complete set of plans drawn to scale (1/4" = 1 foot) showing the placement of each piece of foodservice equipment, all sinks, storage areas, trash cans and wash facilities
- ___ Plans must include general plumbing, and lighting drawings and room finish schedules.
- ___ A site plan locating exterior equipment, such as dumpsters and walk-ins.
- ___ Manufacturer specification sheets for each piece of new equipment. All equipment must be NSF listed, UL classified for sanitation **or** constructed to meet NSF/ANSI standards.
- ___ The proposed menu, including consumer advisory if needed.
- ___ Plan Review Fee: \$250.00 cash, credit card or check

General Information

- Plan review completion varies seasonally and averages two weeks after a completed application is processed.
- The Food Service permit is issued on-site after all requirements are met.
- The foodservice owner/manager must be present to sign the food service permit.
- **No Food** is to be in the kitchen until it has been permitted by Toe River Health District.
- The food service permitting evaluation does not guarantee a permit will be issued.
- The entire site must pass the foodservice permitting evaluation to receive a permit.
- **The review fees for plan review applications are non-refundable after the review has started.**



Useful information & websites:

- A kitchen design should include designated clean & dirty zones to prevent cross-contamination and consider flow patterns for the following:
- Food (Receiving, Storage, Preparation & Service)
- Dishes & Tableware (Clean Storage, Service, Soiled, Cleaning, Air Drying & Storage)
- Utensils & Containers (Clean Storage, Service, Soiled, Cleaning, Air Drying & Storage)
- Trash & Garbage (Service Area, Holding, & Storage)
- NC DHHS Food Protection Division Resources.
<https://ehs.dph.ncdhhs.gov/faf/food/resources.htm>

Hours of Operation

Day	Mon	Tues	Wed	Thurs	Fri
Open					
Close					

Type of Operation: (Check all that apply)

Sit-down meals		Catering	
Take-out		Other (explain)	
Single-Service		Shared Kitchen	
Muti-Use Utensils		Commissary	



Specialized Food Processing Procedures

Written approvals must be in place prior to the use of specialized processes. The use of these processes without approval can result in permit action.

Will specialized food processes be conducted? YES_____ NO_____

(8-201.13 A HACCP plan is required for acidification (sushi rice), reduced oxygen packaging, sous vide, curing, smoking, sprouting beans or drying process)

Check any specialized processes that will take place:

Curing () Smoking () Acidification(Fermenting/Pickling) () Sprouting Beans ()

Dehydrating () Sous vide () Reduced Oxygen Packaging () canning () Vacuum packaging) () Other ()

You will need to submit your HACCP plan & Variance Request to the NC Food Code Variance Committee for approval for a specialized food process to be conducted in your foodservice establishment. (8-103.10 Modifications & Waivers)

Request an application from the State Variance Committee by email

ncvariancecommittee@dhhs.nc.gov

Will any meats, eggs, seafood, poultry, and shellfish served or sold raw or undercooked? YES___ NO ___

If YES, then provide Consumer Advisory with menu submission. (see NC Food Code 3-603.11- Consumer Advisory)



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Chart B: Check all that apply

Table with 11 columns: Proteins (Meats & Seafood), Supplier / Vendor, Refrigerated, Frozen, Dry, Canned, Bagged, Raw/ Fresh, Pre-Cooked, Whole, Pre-Portioned. The table contains 20 empty rows for data entry.



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Cooling Processes (cooling down food after cooking for storage) Indicate how hot foods will be cooled rapidly from above 135°F to 41°F after being cooked.

Check all that apply

Cooling Process	Meat	Seafood	Poultry	Soup	Sauce	Other
Shallow Pans in Refrigerator						
Ice Baths						
Rapid Chill						

FOOD STORAGE

Check all that apply

Equipment	Number of Units	Total Cubic-Feet of Space for each unit	Ready to Eat	Raw Proteins
Walk-in Refrigeration Storage				
*Reach-in Refrigeration Storage				
Walk-in Freezer Storage				
Reach-in Freezer Storage				
Work Top Freezer				
*Flip Top & Work Top Refrigeration				
*Refrigerated Drawers				



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***Raw meats, poultry & seafood should not be stored in the same flip top units as cooked or ready-to-eat foods.**

CONSTRUCTION: Indicate which materials will be used in the following areas

AREA	FLOOR	BASEBOARDS	WALLS	CEILING
Kitchen				
Bar				
Food Storage				
Toilet Rooms				
Other Storage				
Can Wash/Mop Basin				
Dish Washing Area				
Walk-in Refrigeration & Freezers				

INSECT & RODENT CONTROL: Check all that apply

	Fly Fans or Air Curtains	Self-Closures
Delivery Doors		
Entry Doors		
Screened Doors		
Restroom Doors		
Drive Thru Pickup Window		
Walk-Up Screen Window		



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GARBAGE & REFUSE: Check all that apply

	YES	NO	INDOOR	OUTSIDE
Compactor (stored on asphalt or concrete)				
Dumpster (stored on asphalt or concrete)				
Trash cans with lids				
City Trash Bags				
Recycle Containers with lids				
Dirty Linen Containers with lids				
Grease Recycling Containers/Systems (stored on asphalt or concrete)				
Can Wash (3'x curbed pad sloped to drain with hot and cold water and backflow prevention with mop rack)				

Do you plan to donate food? _____ Yes _____ No

Where will all chemicals be stored? _____

ICE:

Made on premises _____ Purchased commercially? Source _____

WATER HEATER : (minimum with 80°F rise)

Gas _____ Electric _____

On demand Make and Model# _____

Number of on demand units to be installed _____

Tank Water Heater Make and Model# _____

Recovery Rate (gallons per hour) _____ Storage Capacity (gallons)

EMPLOYEE STORAGE (Required)

Describe storage facilities for employees' personal belongings:



LINENS Check all that apply

Cleaning methods	Onsite clothes washer	Onsite clothes dryer	Laundry service	Manual 3 compartment sink	Dishwasher
Aprons					
Uniforms					
Cut Resistant Gloves					
Wiping Cloths					
Table Cloths					
Cloth Napkins					
Oven Mitts					

Location of dirty linen storage: _____

Location of clean linen storage: _____

PREPARATION AREAS – Numbers of Prep tables with sinks and/or Prep sinks with Drain boards

Produce/Ready-to-Eat _____ Raw Proteins _____ Sushi _____

DISHWASHING FACILITIES

At least one 3-compartment sink (with integral drain boards on each side) large enough to submerge the largest equipment and utensils are required.

Dimensions of sink basins: Length ___ Width ___ Depth ___

Length of drain boards (at least 24”) _____ Right _____ Left

Spray arm faucets should be installed at three comp sinks for pre-rinsing.



What type of sanitizer is used? Chlorine_____ Iodine_____ Quaternary
Ammonium _____ Hot water _____
Other, Describe: _____

Dishwasher sanitizing cycle used: Hot water_____ Chemical _____
Make & Model _____

The total amount of square feet of air drying space provided: _____ft²

This space is air drying and should not be used as clean dish and/or ware storage.

HANDWASHING & TOILET FACILITIES

- Hand washing sinks with hot and cold running water, soap and individual paper towels must be provided in each food preparation and ware washing area.
- Hand wash lavatories must be placed to prevent cross-contamination.
- Identify all handwashing lavatories in all restrooms and work areas (zones).

**Please contact Environmental Health Plan Review for assistance at
828-737-6053**