



Macon County
Public Health

FOOD ESTABLISHMENT PLAN REVIEW APPLICATION

The intent of this application is to answer questions that are not provided on the plans regarding the operation of the facility and to provide the local health department official with the operational procedures when the facility opens.

Local Health Department Review Process

Upon completing the application and submitting the plans needed, the following payment must be submitted to this department before the review process can take place.

See fee schedule on county website:

<http://maconnc.org/images/environmental-health/Waste-Water-Fees.pdf>

Environmental Health Plan Review Section

Please be aware that franchised, chain, and prototypical type facilities plans are required to be submitted to the Environmental Health Services Section; Facility and Plan Review Unit, Parker Lincoln Building, Room 1A109, 2728 Capital Blvd., Raleigh, NC 27604 for review. *A “prototype franchised or chain facility” as defined by this department is any chain or franchised facility that has the same basic menu and equipment arrangement.* If there is any question as to where to submit the plan please contact us. A \$200.00 plan review fee must accompany all plans that are required to be reviewed by the plan review section in Raleigh.

If you have any questions and/or comments you may contact our section at 828-349-2490. For additional information concerning facility design and layout you can access the “Guidelines For the Design, Installation and Construction of Food Establishments in North Carolina” by going to the web page <http://www.deh.enr.state.nc.us/> .

CONTENTS AND FORMAT OF PLANS AND SPECIFICATIONS

1. The plans should be a minimum of 11 X 14 inches in size and the layout of the floor plan accurately drawn to a minimum scale of 1/4 inches = 1 foot. This is to allow for ease in reading.
2. Information accompanying the plans should include; the proposed menu, seating capacity, projected daily meal volume for food service operation.
3. The plans should show the location and when requested elevated drawing of all food service equipment. Each piece of equipment shall be clearly labeled on the plan with its common name.
4. Adequate rapid cooling including ice baths and refrigeration, and hot-holding facilities for potentially hazardous food (PHF) should be clearly designated on the plan.
5. When menu dictates, separate food preparation sinks should be labeled and located to preclude contamination and cross-contamination of raw and ready to eat foods.
6. Adequate hand washing facilities used for no other purpose should be designated for each toilet facility and in the immediate area of food preparation and dishwashing area.
7. The plan layout should contain room size, aisle space, space between and behind equipment, and the placement of the equipment on the floor.
8. Auxiliary areas such as storage rooms, garbage rooms, toilets, basements and/or cellars used for storage or food preparation should be represented on the plan and all features of these rooms shown as required by the standards.
9. The plans and specifications should also include:
 - A. Entrances, exits, loading/unloading areas and docks;
 - B. Completed finish schedules for each room to include floors, walls, ceilings and coved juncture bases;
 - C. Plumbing schedule to include location of the floor drains, floor sinks and water supply lines, overhead waste water lines, hot water lines, hot water generating equipment with capacity and recovery rate, backflow prevention, waste water line connections.
 - D. Electrical layout, electrical panels and disconnects.
10. Lighting Requirements;
 - A. Food contact surfaces = 50 foot candles (540 lux)
 - B. Utensil washing area = 50 foot candles (540 lux) (lighting in utensil washing area and on food contact surfaces shall be measured at 30 inches above the floor and/or at the work levels)
 - C. All other area = 10 foot candles (110 lux) (Lighting to be measured at 30 inches above the floor.)
 - D. Light bulbs in food preparation, storage, and display areas shall be shatter-proof or shielded so as to preclude the possibility of broken bulbs or lamps falling into food. Shatter-proof or shielded bulbs need not be used in food storage areas where the integrity of the unopened packages will not be affected by broken glass falling onto them and the packages, prior to being opened, are capable of being cleaned. Heat lamps shall be protected against breakage by a shield surrounding and extending beyond the bulb, leaving only the face of the bulb exposed in food preparation area.
11. Insure that all food service/kitchen equipment is NSF International (NSF) listed, Underwriters Laboratories Inc., Classified for Sanitation or if not NSF or UL listed/classified, be constructed to meet NSF standards as specified according to 15A NCAC 18A .2600, Rule .2617 paragraph (d).

12. Source of water supply and method of sewage disposal. The location of these facilities should be shown and evidence submitted that state and local regulations are to be complied with.
13. As specified according to 15A NCAC 18A .2600, Rule .2632 "Storage Spaces". All items stored in rooms where food or single-service items are stored shall be at least 12 in. (30.48 cm.) above the floor when placed on stationary storage units or 6 in. (15.24 cm.) above the floor when placed on portable storage units or otherwise arranged so as to permit thorough cleaning.
14. A mop sink with facilities for hanging wet mops and storage of mop buckets. As specified according to 15A NCAC 18A .2600, Rule .2626, "Disposal Of Waste". Facilities shall be provided for the washing and storage of all garbage cans and mops. These facilities can be incorporated into a janitor closet.
16. Garbage can washing area/facility. As specified according to 15A NCAC 18A .2600, Rule .2626, "Disposal Of Waste". Adequate facilities shall be provided for the washing and storage of all garbage cans. The cleaning facilities shall include a combination faucet, hot and cold water, a threaded nozzle and a curbed impervious pad, a minimum recommended size of 36" x 36" x 4" with walls finished being easily cleanable and nonabsorbent to a height of 48 inches. A shelf may also be provided for the storage of cleaning supplies and/or chemicals. *If the unit is utilized as a combination can wash/mop sink than the minimum recommended size for this unit is 36" by 48".*
17. Dumpster pad and location as specified according to 15A NCAC 18A .2600, Rule .2626, "Disposal Of Waste".
18. Grease traps and/or grease interceptor location.
19. Grease storage containers and storage location.
20. Cabinets/shelves for storing toxic chemicals.
21. Dressing rooms, locker area, employee rest area, and/or coat rack as required.

Please Enclose the Following Documents

- Proposed menu items (including seasonal variations in the menu).
- Manufacturer specification sheets for each piece of equipment shown on plans.
- Site plan showing location of business in building, location of building on site including alleys, streets and location of any outside facility (dumpster, walk-ins, etc.).
- Plan of facility drawn to scale showing location of equipment, plumbing, electrical service and mechanical ventilation, including location of all electrical panels.

Handwashing/Toilet Facilities Requirements

- * Appropriate hand washing sink shall be provided in each food preparation and ware washing area.
- * All handwashing sinks including those in the restrooms have a mixing valve or combination faucet.
- * All self-closing metering faucets should provide a flow of water for at least 15 seconds without the need to reactivate the faucet.
- * Soap dispensers (wall mounted, individual free standing pump dispensers) shall be available at all handwashing sinks.
- * Hand drying facilities (paper towels, air blower, etc.) and waste receptacles shall be available at all handwashing sinks and in each restroom.
- * Toilet room doors should be self-closing.
- * Handwashing sign shall be posted in each employee restroom.

FOOD ESTABLISHMENT PLAN REVIEW APPLICATION

Complete and return this part of the application with the plans.



Macon County
Public Health

Type of Construction: NEW _____ EXISTING _____

Name of Establishment: _____

Establishment's Address: _____

City: _____ State: _____ Zip Code: _____

Phone if available: (____) - (____ - _____) Fax: (____) - (____ - _____)

Name of Owner or Owner's Representative: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (____) - (____ - _____) Fax: (____) - (____ - _____)

E-mail Address: _____

Applicant's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (____) - (____ - _____) Fax: (____) - (____ - _____)

E-mail Address: _____

Title (owner, manager, architect, etc.): _____

Hours of Operation

Sun _____ Mon _____ Tue _____ Wed _____ Thu _____ Fri _____ Sat _____

Number of Seats _____

Number of Staff _____ (Maximum per shift)

Facility Total Sq. Ft. _____

Projected Number of Meals to be Served: (Approximate number)

Breakfast _____ Lunch _____ Dinner _____

Projected Start Date of Construction _____

Projected Completion Date of Project _____

Type of Service (Check all that applies)	Type of Service (Check all that applies)
Sit Down Meals _____	Mobile Food Unit _____
Take Out _____	Push Cart _____
Caterer _____	Single Service Utensil Only _____
Limited Food Service _____	Multi-Use Utensil Service Only _____
Temporary Food Stand _____	Both Multi-Use and Single Service Utensils _____
Other (Please specify) _____	

FOOD PREPARATION REVIEW

Check categories of Potentially Hazardous Food (PHF) to be handled prepared and served.

CATEGORY	Yes	No
Thin meats, poultry, fish, eggs, (hamburgers, chicken breast, fish filet, etc.)	_____	_____
Thick meats, whole poultry (whole roasts, pork, chicken, meat loaf, etc.)	_____	_____
Hot processed foods (soups, stews, chowders, casseroles)	_____	_____
Bakery goods (pies, custards, creams)	_____	_____
Other: _____	_____	_____

PLEASE ANSWER THE FOLLOWING QUESTIONS

FOOD SUPPLIES - All food supplies shall come from an inspected and approved source.

COLD STORAGE

1. Adequate and approved freezer and refrigeration shall be available to store frozen foods at 0° F and below, and refrigerated foods at 45° F (7° C) and below and each refrigerator/freezer have a thermometers that is accurate.

- Provide total footage of space dedicated to walk-in cold storage _____
- Provide total footage of space dedicated to walk-in freezer storage _____
- Provide total number of reach in coolers _____
- Provide total number of reach in freezers _____

2. Will raw meats, poultry and seafood be stored in the same refrigerators and freezer with cooked/ready-to-eat foods? Yes _____ No _____

If yes, how will cross-contamination be prevented? _____

THAWING

Please indicate by checking the appropriate box how PHF (potentially hazardous food) in each category will be thawed. More than one method may apply.

Thawing Process	Thick Meats	Thin Meats	Fish Seafood	Poultry Products	Baked Goods
Refrigeration					
Running Water less than 70° F (21° C)					
Cooked Frozen (indicate wt. lbs.)					
Microwave					

Other (describe): _____

COOKING PROCESS

Item #1 - Will food product thermometers (0° – 212° F) be used to measure final cooking/reheating temperatures of PHF (potentially hazardous food)? Yes ____ No ____

Minimum cooking temperature of product utilizing convection and conduction heating equipment:			
Product	Time & Temperature	Product	Time & Temperature
Beef roast	130° F	Comminuted meats	155° F
Seafood	145° F	Poultry	165° F
Pork	150° F	Other PHF	140° F
Eggs	145° F	* reheating PHF	165° F

Item #2 - Hot Holding

How will hot PHF (potentially hazardous food) be maintained at 140° F (60° C) or above during holding for service? Indicate type and number of hot holding units.

Item #3 - Cold Holding

How will cold PHF (potentially hazardous food) be maintained at 45° F (7° C) or below during holding for service? Indicate type and number of cold holding units.

Item #4 - Cooling

Please indicate by checking the appropriate box how PHF (potentially hazardous food) will be cooled to 45° F (7° C) within 6 hours (140° F to 70° F in 2 hours and 70° F to 45° F in 4 hours).

Cooling Process	Thick Meats	Thin Meats	Fish Seafood	Poultry Products	Baked Goods
Shallow Pans					
Ice Baths					
Rapid Chill					

Other (describe): _____

FOOD PREPARATION

1. Please list categories of food prepared more than 12 hours in advance of service.

2. Will disposable gloves and/or utensils and/or food grade paper be used to minimize handling of ready-to-eat foods? Yes ____ No ____
3. Is there an established policy to exclude or restrict food workers who are sick or have infected cuts and lesions? Yes ____ No ____
Please describe procedure: _____

4. How will cooking equipment, cutting boards, counter tops and other food contact surfaces which cannot be submerged in sinks or put through a dishwasher be cleaned and sanitized?
Please describe procedure: _____

THE FOLLOWING 4 QUESTIONS DEAL WITH FOOD PREPARATION PROCEDURES FOR FACILITIES.

Food preparation procedures are needed to obtain information on how the food is prepared and to help determine that adequate facilities are available. The food preparation procedures should include types of food prepared, time of day and equipment used for service in the facility.

- Attached is Food Item Preparation Worksheet Supplement for additional food items prepared in the facility.)
- If your company has food preparation procedures already developed, these can be submitted as part of the plan review approval process.

Preparation Procedures

1. Produce

- a. Will produce be washed or rinsed prior to use? Yes _____ No _____
- b. Is there an approved location used for washing or rinsing produce? Yes _____ No _____
- c. Will it be used for other operations? Yes _____ No _____

Please describe the preparation procedures to wash, rinse, thaw, and prep produce and indicate the location of equipment to support this operation. These procedures should include time of day and frequency of preparation for the produce at this location. The preparation procedure should include dishes (proposed menu items) in which the produce will be used.

2. Seafood

- a. Will seafood be washed or rinsed prior to use? Yes _____ No _____
- b. Is there an approved location used for washing or rinsing seafood? Yes _____ No _____
- c. Will it be used for other operations? Yes _____ No _____

Please describe the preparation procedures to wash, rinse, thaw and prep seafood and indicate the location of equipment to support this operation. These procedures should include time of day and frequency of preparation for the seafood at this location. The preparation procedure should include dishes (proposed menu items) in which the seafood will be used.

3. Poultry

- a. Will poultry be washed or rinsed prior to use? Yes _____ No _____
- b. Is there an approved location used for washing or rinsing poultry? Yes _____ No _____
- c. Will it be used for other operations? Yes _____ No _____

Please describe the preparation procedures to wash, rinse, thaw and prep poultry and indicate the location of equipment to support this operation. These procedures should include time of day and frequency of preparation for the poultry at this location. The preparation procedure should include dishes (proposed menu items) in which the poultry will be used.

4. Pork and/or Red Meat

- a. Will pork and red meats be washed or rinsed prior to use? Yes _____ No _____
- b. Is there an approved location used for washing or rinsing pork and red meats? Yes _____ No _____
- c. Will it be used for other operations? Yes _____ No _____

Please describe the preparation procedures to wash, rinse, thaw and prep pork and/or red meat and indicate the location of equipment to support this operation. These procedures should include time of day and frequency of preparation for the pork and/or red meat at this location. The preparation procedure should include dishes (proposed menu items) in which the pork and/or red meat will be used.

I. DRY GOODS STORAGE

Is appropriate dry good storage space provided based upon menu, meals and frequency of deliveries?

Yes _____ No _____

Provide information on the frequency of deliveries and the expected gross volume that is to be delivered each time. _____

Provide total square footage of shelf space dedicated to dry storage _____ sq. ft.

Provide type of approved food storage containers being used to store bulk food products. _____

II. DISHWASHING FACILITIES (Utensil wash sink)

- 1. Size of pot/utensil sink to be used: _____ Two compartment sink
 _____ Three compartment sink
 _____ Four compartment sink

Size of sink vats: _____ Length _____ Width _____ Depth _____
 Drainboards size: _____ Right _____ Left

- 2. Does the largest pot, pan or food storage container fit into each compartment of the pot sink?
 Yes _____ No _____
- 3. What type of sanitizer is to be used?
 ___ Chlorine ___ Iodine ___ Quaternary Ammonium ___ Hot Water

DISHWASHING FACILITIES (Dishmachine)

- 1. Is a Dishmachine used in the facility? Yes _____ No _____
 - Dishmachine Make and Model: _____
 - Type of sanitization used: _____ Chemical type: _____
 - Test papers and/or kits shall be available for checking sanitizer concentration.
 - Hot water (180° F temperature provided) Yes _____ No _____
 - Size of booster heater: _____
 - Is ventilation provided for the dishmachine? Yes _____ No _____
 - All dishmachines shall have templates with operating instructions and all dishmachines shall have temperature/pressure gauges as required that are accurately working.

2. Appropriate air drying space shall be available for the air drying of all washed utensils with the use of drainboards, wall or overhead shelves, stationary or portable racks.

Please describe type and location: _____

Provide total square footage of shelf space dedicated to air drying: _____ sq. ft.

III. WATER SUPPLY/ SEWAGE SUPPLY

- 1. Is water supply: Public _____ Private Well _____ Is sewer: Municipal _____ Onsite Septic _____
 - If the Water supply is other than a Municipal supply then it will be required to be registered with Public Water Supply.

2. If water supply is from a Community Water Supply system is it registered and approved as public water supply?
 Yes _____ No _____
- If yes, please attach copy of written approval and/or permit.
3. Grease trap approved by: Municipal _____ Onsite Sewage Section _____ Not required _____
4. Please check one: Is the ice made on premises _____, or purchased commercially _____
 If made on premises than specifications for the ice machine will need to be provided.
 Describe provision for ice scoop storage: _____

IV. INSECT AND RODENT HARBORAGE

1. How is fly protection provided on all outside entrances?
A. Screen Doors Yes _____ No _____ N/A _____
B. Air Curtains (Fly Fan) Yes _____ No _____ N/A _____
2. All windows that open have one of the following forms for fly protection?
A. Minimum #16 mesh screening Yes _____ No _____ N/A _____
B. Air Curtains (Fly Fan) Yes _____ No _____ N/A _____
C. Self Closing Yes _____ No _____ N/A _____
3. All outside doors shall be self-closing with rodent proof flashing and all pipe penetrations, beverage chases & electrical conduit chases sealed; ventilation systems exhaust and intakes protected to prevent insects and other vermin from entering the facility.
4. Indicate/describe location where insecticides/rodenticides are stored. _____

V. MOP CLEANING FACILITIES

Is a mop basin provided? Yes _____ No _____
 If yes, please describe facility for cleaning of mops and other equipment: _____

VI. GARBAGE AND REFUSE

Inside

1. Do all containers have lids? Yes _____ No _____
 Describe location of garbage containers in kitchen: _____

2. A garbage can cleaning facility is required as specified by .15A NCAC 18A .2600, Rule .2600 Disposal of Wastes. Please specify area and size: _____

Outside

1. The area around the premises shall be clear of unnecessary brush, litter, boxes and other vermin harborage.
2. Will a dumpster be used? Yes _____ No _____
 Contractor Service: _____

3. Will the dumpster be cleaned on site? Yes _____ No _____
• If the dumpster is to be cleaned on site, then the waste water from the cleaning operation will be required to be discharged to a sanitary sewer system.

4. Is the dumpster to be cleaned by the contractor service? Yes _____ No _____

5. Describe surface and location where dumpster/compactor/cans are to be stored:

6. Type and location of waste cooking grease storage receptacle: _____

7. Is there an area to store recycled containers? Yes _____ No _____
Describe: _____

8. Location and size of grease trap: _____

VII. MISCELLANEOUS

1. Describe storage facilities for employee's personal belongings (i.e., purse, coats, boots, umbrellas, etc.):

2. Are clean and dirty linen storage provided on premises:
If yes, where? _____

VIII. FINISH SCHEDULE

Applicants must fill materials (i.e., quarry tile, stainless steel, 6” plastic covered molding, etc.)

Area	Floor	Base	Walls	Ceiling
Kitchen				
Bar				
Food Storage				
Other Storage				
Toilet Rooms				
Dressing Rooms				
Garbage & Refuse Storage				
Mop Service Basin Area				
Other				
Other				
Other				
Other				
Other				

IX. PLUMBING

Plumbing Fixtures	Indirect Waste			Direct Waste
	(Floor sink)	(Hub Drain)	(Floor Drain)	
Dishwasher				
Garbage Grinder				
Ice Machines				
Ice Storage				
Food Prep Sinks				
Utensil/Pot Wash				
Handwash				
Steam Tables				
Dipper Wells				
Refrigeration				
Potato Peeler				
Washing Machine				
Other				
Other				

Any sink or equipment in which food or utensils is washed, prepared or stored must be indirectly drained (an air gap between the equipment drain and the fixed plumbing).

XIII. HOT WATER HEATER SIZE AND CAPACITY

The following is the location to access and download the Excel Hot Water Program

<http://www.deh.enr.state.nc.us/ehs/Food/PlanReview/hotwater-Calculator%20for%20NC.xls>

Hot Water Heater Calculation Worksheet					
Equipment	Quantity	Times	Size	Equals	GPH
One-Comp. Sink See Note #2		X	__ by __ by __	=	
Two-Comp. Sink See Note #2		X	__ by __ by __	=	
Three-Comp. Sink See Note #2		X	__ by __ by __	=	
Four-Comp. Sink See Note #2		X	__ by __ by __	=	
One-Comp Prep Sink		X	5 GPH	=	
Two-Comp Prep Sink		X	10 GPH	=	
Three-Comp Prep Sink		X	15 GPH	=	
Three Comp. Bar Sink See Note #2		X	__ by __ by __	=	
Four Comp. Bar Sink See Note #2		X	__ by __ by __	=	
Hand Sink (including restrooms)		X	5 GPH	=	
Pre-Rinse		X	45 GPH	=	
Can Wash		X	10 GPH	=	
Mop Sink		X	5 GPH	=	
**Dishmachine		X	Note #1	=	
Cloth Washer		X	15 GPH	=	
Hose Reels		X	5 GPH	=	
Other Equipment		X		=	
Other Equipment		X		=	
Other Equipment		X		=	

Total 140° F GPH (gallons per hour) Recovery Requirements	Total =>	
Note – 140° F Hot water heaters are to be sized at the 140° F GPH recovery required at a temperature rise of 100° F.		

Note #1	Dishwasher (_____ gals/hr. FINAL RINSE x 70%)
Note #2 – GPH Requirements for sink	GPH = (Sink size in cu. in. x 7.5 gal./cu. ft. x # compartments x .75 capacity) (1,728 cu. in./cu. ft.)
Short version for above	GPH = Sink size in cu. in. X # compartments x .003255/cu. in. Example 24"x 24" x 14" x 3 compartments x .003255 = 79 GPH
Water heater storage capacity. (_____ Gallons Storage)	
Water heater recovery rate in gallons per hour at a 100° F temperature rise. (_____ Gallons per hour)	

STATEMENT: I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior approval from the Macon County Environmental Health Food and Lodging Section may nullify this approval.

Signature(s) _____

 Owner(s) or Responsible Representative(s)

Date: _____ Reviewer Signature and Title _____

Approval of these plans and specifications by the Environmental Health Food and Lodging Section does not indicate compliance with any other code, law or regulation that may be required—federal, state, or local. It further does not constitute endorsement or acceptance of the completed establishment (structure or equipment). A pre-opening inspection of the establishment with equipment will be necessary to determine if it complies with the local and state laws governing food service establishments.

Comment:

FOOD PREPARATION WORKSHEET SUPPLEMENT

Food Item: _____

Will the food item be washed or rinsed prior to use? If yes please indicate location of equipment and describe the washing procedures. Include time of day and frequency for washing or rinsing the product at this location:

Location of equipment: (indicate equipment number from floor plans) _____

Time of day and frequency:

Procedure used to wash or rinse food item:

Please describe the preparation procedures for the food items described above and indicate location (# from floor plan) of equipment to support this operation. The preparation procedure should include dishes in which the product will be used, and should include time of day and frequency of preparation for the food item at this location:

Location and type of equipment: _____

Time of day and frequency:

Food item preparation procedures:
