

**Buncombe County Health and Human Services** 

Public Assistance & Work Support Strategies ~Public Health ~ Social Work Services ~ Veterans Services

Stoney Blevins Health and Human Services Director

Areas designated for EMPLOYEES to eat, drink, and use tobacco shall be located so that FOOD, EQUIPMENT, LINENS, and SINGLE-SERVICE and SINGLE-USE ARTICLES are protected from contamination.

APPLICATION FOR A FOOD ESTABLISHMENT PERMIT AND PRE-OPENING CHECKLIST

## (Expansion/Remodel)

| Name of Establishment:                                  |                                |                      |                             |
|---|--------------------------------|----------------------|-----------------------------|
| Name of Applicant:                                      | Phone:                         |                      |                             |
| Mailing Address:  |                                |                      |                             |
| City:   | State:                         | Zip C                | Code:                       |
| Manager/Person in Charge:                               |                                |                      |                             |
| Mailing Address for Establishm                          | 1ent:                          |                      |                             |
| City:   | State:                         | Zip                  | o Code:                     |
| Email Address:  | Phone:                         |                      |                             |
| Location of Establishment:<br>(If different from above) |                                |                      |                             |
| Establishment is owned by:                              |                                |                      |                             |
| AssociationCorpora                                      | tion IndividualPart            | nershipOther         | Legal Entity                |
| Attach names, titles and addr                           | esses of persons comprising    | the legal ownership  | o including the owners      |
| and officers, and the local res                         | ident agent if one is required | l based on the type  | of legal ownership.         |
| Establishment Type: Mobi                                | leStationaryTempor             | aryPermanent _       | Shared Use                  |
| Prepares and Serves Potential                           | ly Hazardous Food (PHF)/Tim    | e Temperature Cont   | trol for Safety Food (TCS): |
| To Order upon Consum                                    | er Request                     |                      |                             |
| In Advance and Discards                                 | Unserved FoodU                 | ses Time as a Public | Health Control              |
| Prepares PHF/TCS by:Co                                  | cokingCoolingR                 | eheatingHot I        | holding                     |
| C   | old holdingFreezing            | ThawingF             | Par cooking                 |
| Prepares food for delive                                | ry to and consumption at a lo  | ocation off premises | i                           |
| Prepares food for a High                                | nly Susceptible Population     |                      |                             |
| Prepares only non PHF/                                  | TCS                            |                      |                             |
| Wastewater System: M                                    | unicipal/CommunityO            | n-Site System        |                             |
| Box 7408, Asheville, NC 28802<br>3) 250-5500            |                                |                      | buncombecounty.org          |

In accordance with Federal law and U.S. Department of Agriculture (USDA) and U.S. Department of Health & Human Services (HHS) policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. Under the Food Stamp Act and USDA policy, discrimination is prohibited also on the basis of religion or political beliefs.

Water Supply: \_\_\_\_\_Municipal/Community \_\_\_\_\_On-Site System

PROJECTED OPENING DATE: \_\_\_\_\_

Please submit this application at least 30 calendar days prior to the projected opening date, per 15A

NCAC .2658 as referenced in Section 8-302.11 of the NC Food Code Manual.

I attest to the accuracy of the information provided in this application.

Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_\_

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#### CHECKLIST

| The following pre-opening checklist is provided to   | o assist with compliance to obtain a Food |
|--|---|
| Establishment Permit:  |   |
| Copy of the menu if changed from original  |   |
| Plans  |   |
| Fee  |   |
| Cut sheets for new equipment   |   |
| Will establishment continue to operate during  | ng remodel?                               |
| If yes, please specify how food and equipment will   | be protected during construction.         |
|  |   |
|  |   |
|  |   |
| When scheduling the pre-opening inspection, cor  |   |
| Department at least 3 days prior to the projected  | opening date.                             |
| Hours of Operation:  |   |
| Sun Mon Tues Wed   | Thu Fri Sat                               |
| Projected number of meals served between projected number of meals served number o | roduct deliveries:                        |
| Breakfast Lunch Dinner   |   |
| Number of Seats Facility Total Square  |   |
| Projected Start of Construction  |   |
| Type of Food Service:  | Check all That Apply                      |

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- o Restaurant
- o Food Stand
- o Drink Stand
- o Commissary
- o Meat Market
- Other (explain) \_\_\_\_\_\_

- o Sit-down Meals
- o Take-out Meals
- $\circ$  Catering

Single-service (disposable): □Plates □Glassware □Silverware

Multiuse (reusable): □Plates □Glassware □Silverware

Environmental Health Services Attn: Plan Review 30 Valley Street Asheville, NC 28801 P: (828) 250-5016 F: (828) 250-6161 EHRequest@buncombecounty.org

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