

Chatham County Environmental Health 80 East Street, P.O. Box 130 Pittsboro, NC 27312

Catering Food Service Application

"Caterer" means a person operating from a permitted food service establishment who makes an agreement with one individual or firm to provide a predetermined quantity of food on a specific date or dates at a site not open to the general public. North Carolina food rules: <u>http://ehs.ncpublichealth.com/rules.htm</u>

Health Department review must be completed for the approval and permitting of Shared-Use Kitchen / Commissary spaces and catering operation. The review fee does not guarantee a food permit.

Submit application online via Open Gov portal at https://chathamcountync.viewpointcloud.com/

| Catering Company Name: |
|---|
| Billing Address: |
| Phone: Cell: |
| Email Address: |
| Website Address: |
| Owner / Manager Name: |
| 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: |
| Phone: Cell: |
| Name of Ownership Local Agent: |
| Local Agent Email Address: |

Catering Application Completion Information

- All applications are processed by the Food and Lodging Plan Reviewer. Once application is • submitted with fee, the Plan Reviewer has 30 days to complete the initial application review. For questions, contact Lisa Morgan at 919-545-8309 or lisa.morgan@chathamcountync.gov
- Once the application and plans are approved. Permit evaluation is by appointment only and is • conducted at the kitchen location.
- All **CATERING equipment**, including transport equipment, must be present during permitting • evaluation.
- Completed applications can be submitted to the Chatham County Environmental Health office or online: https://chathamcountync.viewpointcloud.com/categories/1081
- Environmental Health Office hours are Monday through Friday 8:00 am to 4:00 pm •

This application will not be accepted for processing without:

A completed Catering Plan Review Application includes:

- Caterers renting space from a Shared-Use Kitchen / Commissary must submit a signed • Shared-Use Kitchen / Commissary Agreement for approval.
- Manufacturer specification sheets for each piece of catering and transport equipment. •
- All CATERING equipment, including Transport equipment, must be NSF/ANSI listed • for sanitation or equipment must designed, constructed and approved for intended commercial use.
- Proposed or sample menu •
- Plan Review Fee of \$200 •
- Environmental Health review must be completed for the approval and permitting of Shared-• Use Kitchen / Commissary spaces and catering operation. The plan review fee does not guarantee a permit.

I certify that the information in this application is correct, and I understand that any changes may void or delay plan approval.

Name:

Signature: Date:

(Owner or Responsible Representative)

Hours of Operation

Maximum Meals to be catered at an event

| Day | Open | Close |
|-----------|------|-------|
| Sunday | | |
| Monday | | |
| Tuesday | | |
| Wednesday | | |
| Thursday | | |
| Friday | | |
| Saturday | | |

| Breakfast | |
|-----------|--|
| Lunch | |
| Dinner | |
| Total | |

Delivery / Transportation Equipment Description

| Type of Equipment | Capacity | Quantity |
|-------------------|--------------|----------|
| E.g. Cambro | 4 hotel pans | 4 units |
| | | |
| | | |
| | | |
| | | |

Food Serving Equipment

Will serving equipment be rented? Yes No

If No, where will equipment you own be stored?

Please describe storage location:

Food Preparation Procedures

| Will Time as a Public Health Control be used for any menu item? Using time limits instead of keeping food hot or cold. (3-501.19 Time as a Public Health Control) | □ YES | □NO |
|---|--------------|-----|
| Will beef, eggs, fish, lamb, milk, pork, poultry, (including eggs), seafood or shellfish be served or sold raw or undercooked? (3-603.11 Consumer Advisory) | □YES | □NO |
| Will any menu items be packaged for delivery? | TYES | □NO |
| Any foods served to Highly susceptible population? | D YES | □NO |

Specialized Processes

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

<u>Check</u> any specialized processes that will take place:

Curing () Smoking() Acidification(fermentation or pickling)() Sous vide() Reduced Oxygen Packaging (eg: ROP, canning, Vacuum packaging) () Sprouting Beans () Dehydrating () Other ()

You will need to submit your HACCP plan & Variance Request to the NC Food Code Variance Committee for approval for specialized food process to be conducted in your food service establishment. (8-103.10 Modifications & Waivers) Request an application from the State Variance Committee by email at <u>ncvariancecommittee@dhhs.nc.gov</u>

Check categories of Time/Temperature Safety Foods(TCS) to be handled, prepared and served.

| ☐Thin meats, poultry, fish, eggs | (hamburger, sliced meats, fillets) |
|----------------------------------|--|
| □Thick meats, whole poultry | (roast beef, whole turkey, chickens, and hams) |
| □Cold processed food | (salads, sandwiches, vegetables) |
| □Hot processed foods | (soups, stews, rice/noodles, gravy, chowders) |
| □Bakery goods | (pies, custards, cream fillings & toppings) |

FOOD SUPPLIES: (Ingredient List)

List all foods & ingredients used in the food service establishment.

In Chart A: Include all condiments, sauces, dressings, dry goods, cheeses, herbs, produce, breads, pasta, soups, etc. In Chart B: Include all meats, seafood and other proteins.

| ListProduce | | |
|----------------|------|--|
| Dairy | | |
| Dry Foods | | |
| Sauces,/Soups | | |
| Food Suppliers | | |

List how foods will arrive to establishment- Refrigerated, Frozen, Fresh, Dry, Canned, Bagged, Whole, Pre-cooked, Pre-portioned.

| List Proteins |
|----------------|
| Meats |
| Seafood |
| Poultry |
| Food Suppliers |
| List Dishes/ |
| Entrees |
| |
| |
| |

Food Suppliers ____

List how food will be processed- Which foods will be prepared day of event, Which foods will be prepared before event, Which foods will be prepared at catering site, Which foods are Ready to Eat, Which foods are cooled, Which foods are Hot Held? Which foods are Cold Held?

For additional items, please attached catering menu(s.

<u>Cooling</u> (cooling down food after cooking for storage)

Indicate how hot foods will be cooled rapidly from above 135°F to below 41°F after being cooked.

Check all that apply

| Cooling Process | Meats | Seafood | Poultry | Vegetables | Soups | Sauce |
|---|-------|---------|---------|------------|-------|-------|
| In the refrigerator Using Shallow Pans | | | | | | |
| In an Ice Bath | | | | | | |
| Using a Blast Chiller | | | | | | |

KITCHEN EQUIPMENT FOR CATERING PREPARATION

Check all that apply

| | Table | Stainless Table with sink | Prep Sink & Stainless Table |
|-------------------------------|-------|------------------------------|--------------------------------|
| Raw Meat Preparation | | | |
| Raw Seafood Preparation | | | |
| Raw Vegetable Preparation | | | |
| Ready-to-Eat Food Preparation | | | |

KITCHEN EQUIPMENT FOR CATERED FOOD STORAGE

Check all that apply

| | Number of units | Amount of space for catering Number of shelves or ft ² |
|----------------------|-----------------|--|
| Walk-in Cooler | | |
| Walk-in Freezer | | |
| Reach-ins | | |
| Alto-Shams | | |
| Hot Holding Cabinets | | |
| Dry Storage Shelving | | |

ITEMS PROVIDED BY CATERER

| Check all that apply Items provided by Caterer | Number | Storage location |
|--|--------|------------------|
| Multi-use Plates | | |
| Multi-use silverware | | |
| Multi-use cups/glasses | | |
| Disposable Plates | | |
| Disposable silverware | | |
| Disposable cups | | |
| Carving Stations | | |
| Sneeze Guards | | |
| Grills/Cookers | | |
| Chaffing Pans | | |
| Cambros (hot holding) | | |
| Coolers (cold holding) | | |
| Punch Bowls | | |
| Fountains | | |
| Tea Urns | | |
| Coffee Machines | | |
| Ice Sculptures | | |
| Table Cloths/Linens | | |
| Table Skirting | | |
| Serving Stations/Buffet | | |
| Serving Baskets | | |
| Tables | | |
| Chairs | | |
| Tents | | |
| Other items: | | |

| What type of vehicle will be used to transport catering equipment and food? | | | | | | |
|---|----------------------|---------------------------|--|--|--|--|
| □Company van or truck | ☐Mobile Food Unit | □Hot & Cold holding truck | | | | |
| Enclosed trailer | Employee vehicles | □Rental truck | | | | |
| □Other | | | | | | |
| | | | | | | |
| How far will food be transported? | | | | | | |
| □Local events □ 0 | Dut of county events | Out of State events | | | | |

SHARED-USE KITCHEN / COMMISSARY AGREEMENT

A Shared-Use Kitchen / Commissary is a permitted food service establishment or restaurant that provides shared use kitchen facilities for mobile food units, push carts and caterers. This Shared-Use Kitchen / Commissary Agreement is part of the plan review approval and <u>Health</u> <u>Department approval is required</u> for shared use kitchen permits. Loss of commissary without prior change request submittal by the operator will result in permit revocation and require a new plan review application.

Completed by the food service operator:

| Select: Mobile Food Unit _ | Pushcart | Caterer | _New | _ Change request |
|----------------------------|----------|-------------|------|------------------|
| Name of food service: | | | | |
| Operator Name: | | | | |
| Mailing Address: | | | | |
| Email: | | | | |
| Phone Number: | | _Cell Numbe | r: | |

Completed by the permittee or owner of the Shared-Use Kitchen / Commissary:

The management of the Shared-Use Kitchen / Commissary facility noted below, agrees to provide the Shared-Use Kitchen / Commissary for the food service operator named above. Management understands that failure of the food service operator to comply with all laws and rules could result in suspension or revocation of the Shared-Use Kitchen / Commissary permit.

Management understands and agrees to provide the following for each approval:

- Labelling for the designated storage spaces for the operator's exclusive use.
- A designated protected area for food and utensil storage.
- Designated spaces for refrigeration / freezer and dry storage areas.
- Use of the utensil sink to wash utensils.
- An exterior wastewater collection system for disposal of wastewater.
- A protected connection to the potable water supply.
- A method to track Shared-Use Kitchen / Commissary usage, sign-in, digital tracking, etc.
- Shared-Use Kitchen / Commissary access as needed for the operator to maintain rule compliance and separation of time and space between all vendors.

Shared-Use Kitchen / Commissary Agreement confirmation:

Shared-Use Kitchen / Commissary Name: _____

Printed Name of Manager: _____

Signature of Manager: _____