## JOHNSTON COUNTY ENVIRONMENTAL HEALTH DEPARTMENT

309 East Market Street, Smithfield, NC 27577 Phone: 919-989-5180 Fax: 919-989-5190 Email: envhealth@johnstonnc.gov

## **Child Care Center Plan Review Application**

Application and Plan Submittal: This completed Application, a drawing of the floor plan of the proposed facility (see attached example) and a proposed menu must be submitted to the Johnston County Environmental Health Office. This packet can be submitted in person or mail to the address above, or to the email address listed above. If the application is incomplete then you will be contacted with a list of deficiencies. There is <u>not</u> a fee for this plan review.

General Information:			
Name of Center:			
Center's Address:			
Name of Applicant:			
Applicant Phone#			
Name of Owner:			
Owner's Mailing Address:			
Owner's Phone Number:Er			
Who is the Contact Person for this Project?			
Mailing Address:			
Phone #:En	nail:		
Signature of Applicant:		Date:	
Operational Information:			
What are the days and hours that the center plans to be	in operation? _		
Number of children that the center will be licensed for (a	pproximately): _		
What are the ages of the children you plan to care for in			
Will the center have a licensed afterschool program?	Yes	No	
Will the center offer overnight care or two shifts?	Yes	No	
If yes, explain			
Is the proposed center an existing facility/building?	Yes	No	
If yes, what is the date when the facility/building was con	structed?		
If the facility is new, what is the proposed construction st			
What is the projected date for the opening of the center?			
What is the approximate square footage of the facility? _			

## **Food Preparation:**

l) Will meals be prepared at the facility or	catered in?				
If meals are catered into the center, when	hat is the name a	and address o	f the catering fa	cility?	
 2)Will the kitchen equipment be shared w	vith any other gro	oup in the san	ne facility?	Yes	No
If yes, what group will be sharing the eq	uipment?				
B) List the equipment to be used in the kit or domestic:					
l) Will any foods be fried on-site?	Yes	No			
If yes, is a commercial hood system pl	lanning to be ins	stalled?	Yes	No	
		naka na kaika la a na s			
) Check foods that will be prepared in yo				h h	
				raw hamburger precooked meats	
			pre	cooked meats	•
	egg-bas	ea products			
*pre-portioned, ready-to-cook  Where will the above items be washed a	and/or prepped?				
Whole will the above herne be washed a	палог ргорроц.				
Refrigeration / Freezers:					
) Adequate refrigeration and freezer spa	ace provided:				
Conspicuous and accurate thermomete		er and refriger	ator? Ye	s No	
·		•			
) Is a separate hand-washing lavatory p	provided*'?	Yes	No		
* Only food service personnel shall use this lavatory.					
) Will there be a separate metal stem the	ermometer to ch	neck food tem	peratures and w	ater temperat	ures:
Yes No					

Dishwashing Facilities:		
1) Will the center serve food/beverage on:	multi-service articles	single-use articles
When multi-use articles are used, the cent	er must have one of the followi	ng:
Dishwasher and a 2-Co	ompartment sink	
3-Compartment sink		
**The dishwashing equipment must be of sufficient size b	ased on the volume and size of the utensil	s/cookware/service items that will be used.
What are the dimensions of the sink vats the	nat will be used for dishwashinç	g?
2-Compartment sink:	xx	sq. inches
3-Compartment sink:	XX	sq. inches
**There must be a total of at least 8 square feet of counter	top space or drain board space on the side	es of the sinks and/or dish machine.
2) Will the center have a dishwasher:	Yes No	
If so, list the make and model: (provide a spec so	heet if available)	
3) How will all food containers, utensils and	service items be sanitizer in the	e dishwashing process?
Infant Feeding Areas / Classroo	om Food Service:	
1) Where will bottles be stored or prepared	?	
If in the classroom, is there a separate h	nand-washing lavatory and desi	gnated food
preparation counter? Yes	No	
How do you plan on heating the bottles?		
Where is the heating equipment located		
2) Will older children be dining in the classro	oom or in another location?	
How will food be transported to the dining		
Note: If bottles or "sippie cups" are stored in the classroom	, a hand sink in addition to the hand-wash	ing sink for diaper-changes is required.
Dianor Changing Stations		
Diaper Changing Stations		
1) How many designated diaper changing		(indicate all changing stations on the plan)
2) Is a hand-washing sink accessible to ea Explain:		Yes No
3) How do you plan on cleaning / disinfectir		
•	- <del>-</del>	

Solid Wastes:				
1) Is there a can cleaning fac	cility or mop sink?	Yes	No	
2) Will a dumpster be used? Who is the Contractor?	Yes	No		
3) Is there a grease trap?  If yes, where is it located?	Yes	No		
Water and Wastewate	er:			
1) Water Source:	Community	Private well		
2) Sewage service:  *If the center is on a private well and approved.	Municipal sewer serves 25 or more people, do	On-site septic s	•	oply Section that the well is
Water Heater(s):				
shall have a minimun	tings are based on the en sink used for clear n temperature of 120° t are accessible to ch nks shall provide a mi	e number and size on ning and sanitizing, F. hildren shall be temp nimum water tempe	of sinks, capacity of disland laundry machines bered between 80°F and training and laundry machines	hwashing machines ,
List specifications of water he	` '	his should include o	apacity, set	
temperature, and recovery ra		<u>.</u>		
Quantity Capacity:				
Quantity Capacity:				
Quantity Capacity: *Note: Recovery must be in gallons per A specification sheet from the	hour at 100°F rise.			

## Floors, Walls, and Ceilings:

Indicate the materials used in each area: (e.g., Acoustical tile, linoleum, etc.) Walls Ceilings **Floors** Kitchen: Food Storage: Toilet Rooms: Laundry Room: **Utility Room:** Classrooms: \*Ceilings in rooms in which food is prepared shall be non-absorbent. Storage: 1) Where will hazardous substances such as chemicals, cleaners be stored? (Must be stored under lock and key.) 2) Where will medications be stored? 3) Where will the children's personal items (bags, coats, etc.) be stored? 4) Will there be cubbies or coat hooks provided? Yes No 5) Where will mats or cots be stored? Lighting: 1) Do all fixtures have shatterproof or shielded bulbs: No Yes 2) Will there be a minimum of 50-foot candles of light at all work surfaces (including food prep area, utensils washing areas, diaper changing stations, children's work table, etc.)? No 3) Will there be a minimum of 10-foot candles provided in all other areas? Yes No Miscellaneous: 1) Will linens be washed at the center or sent home? 2) Where will the designated sick area be located? 3) How and where will toys be washed and sanitized? 4) Will animals be allowed on the grounds of the facility? Yes No If yes, explain locations and restraints. Additional Information:

**Example of the Drawing of the Floor Plan for a Child Care Center:** Label each classroom with the age group that intends to use it, all hand wash lavatories/sinks, diaper changing stations, food prep areas in the classroom, kitchen and all food equipment, restrooms, can wash or mop sink and laundry room if applicable.

