

### MECKLENBURG COUNTY HEALTH DEPARTMENT PLAN REVIEW APPLICATION

TYPE OF APPLICATION: LUESA Project #	□New □Remodel ☑ Upfit	Projected Sta				
TYPE OF FOOD OPERAT	ION: □Restaurant ☑Food □Other:	Stand □Commi	ssary 🗌	Meat M	Iarket □Bar w/out food	
	FOOD ESTABLISH	HMENT INFORM	ATION			
Name of Establishment: BIRD PIZZERIA						
Establishment Address: 510 E 15th Street Suite A			State: NC		ZIP: 28206	
	OWNERSHI	P INFORMATION	V			
Name of Owner: Kerrel I nompson						
Address: 201 N. Dotger Ave c10		City: Charlotte	State: NC		ZIP: 28207	
Email: contact@birdpizzeria.com	m	Phone Number: 216-372-2746				
APPLICANT INFORMATION (e.g., ARCHITECT/ENGINEER)						
Applicant Name: Nkemdi I hompson		Contact Person:				
Applicant Mailing Address; 201 N. Dotger Ave C10		City: Charlotte	State:		ZIP: 28207	
Email:		Shone Number: 3126183241		1		
FOOD OPERATION INFORMATION						
Hours/Days of Operation		Type of Service (ch	eck all	Employ	<i>i</i> )	
Sun:	Capacity	that apply)		Max per	shift:	
☐ Mon:	×	On-site consumpt				
☐ Tues:	# of Outdoor Seats:	Off-site consumpt	ion		um meals to be served	
☐ Tues: ☑ Wed: 11-3,5-9 ☑ Thurs: 11-3,5-9 ☑ Fri: 2.0		☑ Catering		∐Brea	kfast h 15 er 45	
Thurs: 11-3,5-9		Single-use utensil	S	Lunc	h 45	
Fri: 11-5,5-9		Multi-use utensils	;	<b>∠</b> Dinn	er	
☑ Sat:2-9		Other:				
Proposed menu or comple  Standard Operating Proc Plans must be clearly draw The floor plan must id trash area. Include loc Provide equipment lay Elevation drawings ma Finish schedule showi Manufacturer specifica Note: A color coded flow chart m preparation, service); dishes (cle	t be submitted along with this apple te list of food and beverages to be the list of food preparation, serving ation of any outside equipment of the list of any outside equipment of the list of t	e offered (including serequired upon required upon requires in size) and inclusted and seating areas, representations of facilities (dumpsted and cross-ker Authority (RA). It is a seating area shapment.  Authority demonstra	uest.  ude these is estrooms, ers, well, seeyed with hown on the strong flow properties.	items be storage, septic systemathe equipments.	low: warewashing, janitorial and stem-if applicable). ipment list for: food (receiving, storage,	
Signature: Nkemdi Thompson			Date:		8/29/2021	
Print Name: NKemdi I hon	npson	Title: CO-OWNER	/ applica	ant		

# FOOD PREPARATION PROCEDURES \*Recommend for owner/operator of facility to complete this section for accuracy

### FOOD DELIVERY

	; otensii storage		; rrozen storage		* Identify on plans where storage will be located.	n plans wher	* Identify on p
7.5	. Iltonoil Ctorogo	15.6		eet) allocated fo <b>31.8</b>	<b>FOOD STORAGE*</b> - Identify amount of space (in cubic feet) allocated for:	CORAGE* -	FOOD S
		lontn		Daily□Weekly	3. How often will dry foods or supplies be delivered? □Daily□Weekly ☑ Other	w often will d	3. Hc
		-		ly⊌weekly□	2. How often will refrigerated foods be delivered? $\square$ Daily $\square$ Weekly $\square$ Other:	w often will re	2. Hc
		nonth	2x mo	Veekly <b>⊡</b> 0ther:	1. How often will frozen foods be delivered?□Daily□WeeklyଢOther:	w often will fr	1. Hc

INSTRUCTIONS: Describe the following with as much detail as possible. Indicate Not Applicable (NA) as appropriate.

YES/NO	TPHC procedure (*See attached)	cooked pizzas	Reheating
ON/S∃A		n/a	Cooling  NC Food Code §3-501.14
YES/NO	n/a	n/a	Hot Holding NC Food Code §3-501.16
YES/NO	Electric Mizza Oven 240v i pri	and toppings seen on attached menu)	Cooking NC Food Code §3-401.11
YES/NO	n/a	Ω	<b>Thawing</b> NC Food Code §3-501.13
YES/NO	Reach in fridge	Portobello mushrooms, Red onions, White onions, Pepperoncini, Green peppers, Calabrian peppers, Arugula, Parsley, Basil	Washing NC Food Code §3-302.15
MEETS CRITERIA (RA to circle and Initial)	INDICATE LOCATION AND EQUIPMENT	IDENTIFY FOOD ITEMS	PROCESS

### FINISH SCHEDULE

**INSTRUCTIONS:** Indicate which materials (quarry tile, stainless steel, fiberglass reinforced panels (FRP), ceramic tile, 4" plastic coved molding, etc.). Indicate Not Applicable (NA) as appropriate.

ROOM/AREA	FL00R	FLOOR/WALL	WALLS	CEILING	MEETS CRITERIA
		JUNCTURE			(RA to circle and Initial)
Food Preparation	QT	QT	FRP	FRP	YES/NO
Dry Food Storage	QT	QT	FRP	FRP	YES/NO
Warewashing Area	QT	QT	FRP	FRP	YES/NO
Walk-in Refrigerators and Freezers	N/A	N/A	N/A	N/A	YES/NO
Can wash/Mop sink			N/A OUTDOOR	N/A OUTDOOR	YES/NO
Garbage and Refuse Areas	QT	QT	FRP	FRP	YES/NO
Toilet Rooms	N/A	N/A	N/A	N/A	YES/NO
Other:					YES/NO
Identify the finishes of cabinets, countertops, and shelving: all SS, one butcher block table top	abinets, countertops, a e top	ind shelving:			

## PHYSICAL FACILITIES

**INSTRUCTIONS:** Explain the following with as much detail as possible. Indicate Not Applicable (NA) as appropriate.

Water Supply					Warewashing Facilities	Handwashing facilities	TOPIC
<ul> <li>Is the water supply: ☑ Municipal (public) ☐ Well (private)</li> <li>○ If private, has source been approved? Yes ☐ No ☐</li> <li>Is ice made on premises or purchased commercially? Made on-site ☐ Purchased ☑</li> </ul>	<ul> <li>MECHANICAL DISHWASHING</li> <li>Identify the make and model of the mechanical dishwasher: NA</li> <li>What type of sanitizer will be used? □Chemical □Hot Water</li> </ul>	What type of sanitizer will be used? □Chemical Type: □Hot Water	<ul> <li>Describe size, location and type (drainboards, wall-mounted or overhead shelves, stationary or portable racks) of air drying space:</li> </ul>	• Will the largest pot/ pan fit into each compartment of the 3-compartmentsink?  Yes \( \subseteq \no \) If No, what will be the procedure for manual cleaning and sanitizing of items that will not fit into sink compartments?	MANUAL DISHWASHING  • Identify the length, width, and depth of the compartments of the 3-compartment sink:  (3) 10"x12"x14"	<ul> <li>Identify number of the handwashing sinks in food preparation and warewashing areas:         <ul> <li>Pood Preparation</li> <li>Warewashing Area</li> </ul> </li> <li>Type of hand drying device: ☑ Disposable towels ☐ Hand-drying device</li> </ul>	MINIMUM CRITERIA
YES/NO					YES/NO	YES/NO	MEETS CRITERIA Circle and Initial)

Sewage Disposal  Backflow Prevention	<ul> <li>Is the wastewater connection: Municipal (public) Septic (private)</li> <li>Will all potable water sources be protected for backflow? Yes No□</li> <li>Are all floor drains identified on the submitted floor plan? Yes No□</li> </ul>
Toilet Facilities	<ul> <li>Identify locations and number of toiletfacilities: 2</li> <li>Hot and cold water provided? Yes No □</li> </ul>
Linens	<ul> <li>Will linens be laundered on site? Yes □ No □         If yes, what will be laundered and where?         If no, how and where will linens be cleaned? Disposable         Identify location of clean and dirty linen storage:         How often will linens be delivered and picked up?</li> </ul>
Chemicals/Cleaning	
	Stored away from cooking materials. Underneath 3 compa  • Where will cleaning and sanitizing solutions be stored at workstations?  Underneath 3 compartment sink / handsantizer by POS sy
	How will these items be separated from food and food-contact surfaces?     items will not be in same room as food prep counters

			Garbage, Refuse and Recycling						Pest Control
If yes, where	<ul> <li>Will there be an area to store recyclables? Yes No</li> </ul>	Identify how and where garbage cans and floor mats will be cleaned?      sprayed and cleaned outside with mop sink      Well of the control of the cont	<ul> <li>Will refuse/garbage be stored inside?  ✓ Yes   ✓ No If yes, where   ✓ can near oven</li> </ul>	Note: All pipes and electrical conduit chases must be sealed to prevent rodent access.	Will air curtains be used? If yes, where?	Will insect control devices be used?□Yes □No ▼NA	Will all openable windows have a minimum #16 mesh screening? □Yes □No ▼NA	• Will screens be provided on all entrances left open to the outside? Yes No NA	<ul> <li>Will all outside doors be self-closing and rodent proof? ☐Yes ☐No ☑NA</li> </ul>
			YES/NO						YES/NO

### Pizza Ingredients

### Pizza Dough:

- Flour
- Water
- Salt
- Olive Oil
- Dry Yeast

### Tomato Sauce:

- Tomatoes
- Salt

Toppings: All produce is fresh, no prewashed. Meat arrives frozen and is placed directly on pizza when prepared.

- Portobello mushrooms
- Red onions
- White onions
- Pepperoncini
- Green peppers
- Calabrian peppers
- Garlic
- Arugula
- Parsley
- Basil
- Sausage
- Pepperoni
- Fresh Mozzarella
- Shredded Mozzarella
- Ricotta
- Olive Oil
- Parmesan

### Salad:

- Kale
- Parmesan
- Cesar Dressing (purchased)



### **Mecklenburg County Health Department**

Standard Operating Procedure Time as a Public Health Control (3-501.19)

Facility Name:	Bird Pizzeria		
	510 E. 15th St. Suite A Char	lotte 28206	
from refrigerationservice no more	than 4 hours. Time can be used for foods preps the items are <b>completely cooled</b> by approved	keep it safe. <b>Time begins</b> when food is removed 5F or greater. Food can be displayed or held for ared at room temperature, (i.e. tuna salad, cut method before removing from refrigeration for	
Menu item held	using time Pizza		
**Any FOOD that i	is prepared, cooked, and refrigerated must be proper	ly cooled using 3-501.14 before time is used**	
Cooling method Pizza is p	(Check if N/A) prebaked and placed on pizza rack		
Describe how yo	ou will determine the food is cooled correctly.	(Check if N/A)	
el	ectric thermometer		
Where is the foo	PIZZA ISN bd held for display and service? <mark>back cou</mark>	t displayed, it will be placed on nter next to oven	-
_	ou will ensure the temperature of the food is c		
electr	ic thermometer and appropri	iate labes	
	ill you label and identify the food to know who start time on tape place unde	•	
food is discarded	d after 4 hours?	e thrown away. How you will ensure that the	oizzas
Additional Infor	mation:		
Prepared by:	kemdi Thompson	<sub>Title:</sub> Co-owner	
	Nkemdi Thompson	Co-owner  Date: 9/3/2021	