



CARTERET COUNTY HEALTH DEPARTMENT

Environmental Health Section

3820-A Bridges Street Morehead City, NC 28557

Phone: (252) 728-8499 Fax: (252) 222-7753



CHILD CARE CENTER PLAN REVIEW APPLICATION

Type of Application: New Facility* Remodel of Existing Facility Change of Ownership
**(chain or franchise facilities should submit plans to NCDHHS at address listed on Page 6 of this application)*

Name of Proposed Center: _____

Establishment Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Fax:** _____

Email: _____

Licensee name: _____ **Phone:** _____

Mailing address: _____

City: _____ **State:** _____ **Zip Code:** _____

Number of children for which the facility will be licensed: _____ **Age of Building:** _____

Proposed construction/ remodel date: _____ **Proposed opening date:** _____

Water supply: Public/Municipal On-site Well*
All sources of water used for drinking or food preparation are required to be tested for lead content prior to final approval from the Health Department.

Sewage disposal: Public/Municipal On-site Septic System*

**A separate application must be submitted to the On-site Wastewater and Well Section for review of all proposed and existing septic systems and wells.*

Food Service (check all that apply)

Meals Provided: Breakfast Lunch Dinner Lunches/Snacks from Home
 Snacks Only Catered*

**If meals are catered, please indicate source:* _____

Type of Food Service: Serve in classroom Serve in dining area Family style

Type of Utensils Used: Multi-use utensils (dishes) Single service items (styrofoam/plastic)

Describe how multi-use utensils will be washed, rinsed, and sanitized: _____

List equipment used to hold food cold: _____

List equipment used to hold food hot: _____

How is kitchen access restricted for children? _____

Infant Food Service (if applicable)

Where will bottles/food be stored? Kitchen Infant Room

Where will bottles/food be prepared? Kitchen Infant Room

Where will bottles be warmed? Kitchen Infant Room Method Used? _____

Will there be a refrigerator in the infant room? Yes No

Is there a separate hand wash lavatory in the infant room dedicated for food preparation only? Yes No

Is there counter space in the infant room for food preparation? Yes No

Diapering Stations

In which classrooms will diapering stations be provided? _____

Where will soapy water, disinfectant, and diapering creams be stored? _____

Where will diapering supplies (gloves, diapers, wipes, etc.) be stored? _____

Will potty chairs be used? YES NO If yes, where will they be cleaned?

Will cloth diapers be allowed? YES NO If yes, describe proposed procedure for use: _____

Do all diapering stations have a dedicated hand wash lavatory with tempered water (80-110 F), soap, paper towels, and handwashing sign? Yes No

Hand Wash Lavatories

How many hand wash lavatories are provided in the center? _____

Where are they located? _____

Do all hand wash lavatories have tempered water (80-110 F), soap, paper towels, and handwashing sign? Yes No

Storage

Where and how will cubbies be arranged? _____

Will coat hooks be spaced at least 12 inches apart? (If using a double hook it may not be used for two children) _____

Where and how will cots and/or mats be stored? _____

Where will clean crib and mat sheets be stored? _____

Please indicate where the following types of locked items will be stored:

Medicines (both refrigerated and non-refrigerated) _____

Cleaning supplies and other types of chemicals including aerosols _____

Personal belongings (purses, employee items, etc.) _____

Cleaning and Sanitizing

Do all classroom furnishings have a smooth, washable finish? Yes No

Describe where and how mouthed toys in infant and toddler rooms will be washed and sanitized: _____

What type of sanitizer will be used to sanitize toys and food contact surfaces?
 Chlorine Quaternary ammonium Other _____

What type of disinfectant will be used to disinfect diapering and toileting areas?

Chlorine Quaternary ammonium Other _____

Will test strips for checking the concentration of sanitizer and disinfectant be provided?

Yes No

Water Heating Facilities

Note for your plumber and engineer: The temperature of hot water in the kitchen and any water used for washing laundry will need to be a minimum of 120 F. Any faucets accessible to children must be maintained at 80-110 F. For lavatories used exclusively by school-age children (age 5 and older), the 80 F minimum water temperature does not apply. The Health Department has found that using two water heaters is the best option, one for food service and cleaning facilities and one for hand wash lavatories. If a hand wash lavatory produces hot water that is over 120 F, the facility will be put into a provisional status. If two water heaters are used, please note which one is for the kitchen and which one is for the classroom hand wash lavatories.

How many water heaters will be used? _____

Where will the water heaters be located? _____

Type of water heater proposed: Tankless Storage Tank

If storage tank type, what is the capacity? _____ gallons

Manufacturer & Model Number: _____

How is the water heater powered?

Electric _____ kilowatts (kW) Gas _____ BTU

If one hot water heater will be used, will anti-scald devices be used on hand wash lavatories used by children? Yes No

Lighting

Are lights in all areas including storage closets? Yes No

Do all light fixtures have shatterproof or shielded bulbs? Yes No

Utilities

Where is the mop/trash can wash facility located? _____

Will it be located in a locked space or surrounded by a fence?

Yes No

Is the HVAC, mechanical equipment, etc. locked with a fence around it?

Yes No

Finishes

Please describe the finishes/construction material in the following areas (all must be washable):

Diaper changing counters: _____

Food service counters in infant rooms: _____

Floors in diapering and food service areas of infant and toddler rooms:

Walls of classrooms: _____

Cabinetry in classrooms: _____

Bathroom: Walls: _____

Floors: _____

Ceilings: _____

Kitchen: Walls: _____

Floors: _____

Ceilings: _____

If built prior to 1978, has this structure been tested for the presence of lead-based paint by a certified inspector or risk assessor? _____ If yes, please provide a copy of the report.

OUTDOOR FACILITIES

Does your facility have a swimming or wading pool? YES NO

** Swimming and wading pools must be designed, constructed, operated, and maintained in accordance with the Rules Governing Swimming Pools, 15A NCAC 18A .2500. Unfiltered and non-disinfected containments of water may not be used for water recreation activities.*

Are any outdoor structures made of chromated copper arsenate pressure-treated wood?

YES NO

If yes, list equipment and how/when structures were last sealed? _____

GENERAL

Describe the proposed waiting area for those children who become ill to the extent that they can no longer participate in routine group activities.

Will any animals live at or visit the child care center? YES NO

If yes, describe the type of animal, location and any policies/procedures for veterinary exams and/or records that will be required. _____

Statement: I hereby certify that the information provided herein is accurate to the best of my knowledge.
I understand that:

- Any deviation or variance of this application after it has been approved by this Department may result in the delay or denial of an approved inspection for the licensing agency.
- Child Care facilities which are found to be non-compliant with the design standards listed in 15A NCAC 18A .2800 “Rules Governing the Sanitation of Child Care Facilities” will not receive approval from this Department.
- Approval of this application by Carteret County Environmental Health does not constitute compliance with other codes, laws, regulations, and ordinances imposed by other regulatory authority having jurisdiction.

Signature of Applicant/Operator: _____ **Date:** _____

Application Submission Requirements:

- 1) Completed application.
- 2) Scaled drawing or plans for the facility which show classrooms with assigned ages, food service areas, diapering stations, storage areas, laundry facilities, and mop/trash can wash area.
- 3) Proposed menu if food is prepared and served for meals or snacks.
- 4) Lighting/plumbing layouts.
- 5) Well and septic system information (if applicable).

Please feel free to contact us at (252) 728-8499 if you have questions about this application.

Please submit this application and required documents to:

**Carteret County Health Department-Environmental Health Division
3820-A Bridges Street
Morehead City, NC 28557**

Plans for chain or franchise type facilities shall be forwarded to:

**NC Department of Health and Human Services-Environmental Health Section
Children’s Environmental Health Branch
1632 Mail Service Center
Raleigh, NC 27699-1632**