

*NC Department of Health and Human Services
Children's Environmental Health Unit*

Chain or Franchise Child Care Center Application

Complete this application for submittal of construction plans drawn to scale and specifications for a new Chain or Franchise Child Care Center.

Per 15A NCAC 18A .2802, construction plans drawn to scale and specifications for prototype chain or franchise child care centers shall be submitted to DHHS, Division of Public Health, Environmental Health Section. For submittal instructions, contact the Environmental Health Section of the Local Health Department that serves the county in which the child care center is located.

Plan review and approval is required prior to initiating construction.

Name of Proposed Child Care _____

Location Address _____ City _____ Zip _____

County _____

Number of National locations _____ Number of North Carolina locations _____

Owner or Owner's Representative: _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Operator/Director contact: _____

Phone _____ E-mail _____

General Information

Projected Start Date of Project: _____ Projected Opening Date: _____

Have you contacted NC DCDEE Licensing? YES/NO Name of contact: _____

Proposed maximum capacity of center- Children: _____ Staff: _____

List age groups & number of classrooms per group:

Version 2/1/2024 Facility Name: _____ County: _____
Address: _____

Indicate days and hours of operation: _____

What shifts will the center operate? _____

Is this new construction or remodel of existing structure? _____

Is any part of the center or accessible structures built prior to 1978? YES/NO

Is water supply municipal/community or onsite? _____

If water supply is on-site, how many total people would the well serve (#of staff + # of children + # other people the well serves)? _____

**If the well will serve 25 or more people, call Public Water Supply at 919-571-4700. Water supplies must meet applicable requirements of 15A NCAC 18A .1700 and 15A NCAC 18C.*

Lead testing completed for all water outlets used for drinking or food preparation(.2816(b)): YES/NO/Unsure

Will wastewater disposal be Public/Municipal or private/on-site? _____

Food Service and Preparation

How will meals be provided?

- Prepared/cooked on-site
- Catered from a permitted Food Service Establishment or approved Child Care Center
Name of facility providing food: _____

Other (parents, etc.) Provide specifics: _____

Will potentially hazardous food be prepared prior to the day of service? YES/NO

Will potentially hazardous foods be reheated? YES/NO

Will salads containing potentially hazardous foods be prepared? YES/NO

Will any foods be fried? ("Frying" means to cook over direct heat in hot oil or fat. This includes the oil or fat that is generated by the food or added to the cooking utensil.) YES/NO

Will frozen food be thawed on site? YES/NO How? _____

Will raw fruits/vegetables be provided by the center? YES/NO Describe volume, procedure, and location for washing/preparation: _____

What will your food delivery and pick-up schedule be?

Describe the volume of food stored between deliveries including refrigerated food, frozen food, gallons of milk:

Please list make/model numbers of refrigeration units and locations:

Will human milk be stored frozen? YES/NO

Will frozen human milk be stored for more than 7 days? YES/NO If YES, where will it be stored? _____

Will bulk specialty milk (almond milk, soy milk, lactose free, etc.) be provided by parents? YES/NO If YES, where will it be stored? _____

Will bulk food items be stored in classroom food prep area refrigerators? YES/NO

Where will dry goods, canned food, paper products and single service be stored? _____

Describe where infant bottles and sippy cups will be stored, prepared, or warmed? Specify for each age group.

Will bulk snacks/food be stored in classrooms? YES/NO

Will bulk cold foods be stored in classrooms? YES/NO

Will children's lunches be brought from home? YES/NO Where will lunches be stored? _____

Utensils, Washing, Sanitizer

Type of eating and drinking utensils used: Single-service (disposable) _____ Multi-service (reusable) _____

Will infant bottles or sippy cups be cleaned at the center? YES/NO

**If Yes, sippy cups/bottles will be washed, rinsed, sanitized and air dried in the kitchen*

How many compartments will the utensil sink have? _____

Provide dimensions of utensil washing sink compartments and drainboards: _____

Will a dish machine be provided? YES/NO

If YES, make and model number: _____ Is there a sanitizing cycle? YES/NO

What type of sanitizing cycle (temperature or chemical)? _____

List all sanitizer(s) used in center, Including EPA Reg #: _____

What sanitizer(s) will be used in the kitchen? _____

Provide dimensions of kitchen countertop space: _____

Will highchairs be provided? YES/NO

Describe procedures for washing, rinsing, sanitizing and air drying of highchair feeding trays.

Diapering, Toileting, Disinfectants

List all disinfectant(s) used in center, Including EPA Reg #: _____

What disinfectant will be used for diapering? _____

List rooms that allow children in diapers/pull-ups: _____

Do all rooms with children in diapers/pull-ups have diaper changing stations? YES/NO If NO, Describe diapering location and processes:

Describe construction of the diaper changing table. _____

Where and how will detergent solution, and disinfectant be stored? _____

Where will diaper creams, gloves, diapers, etc. be stored? _____

Will potty chairs be used? YES/NO If YES, detail procedures including where they will be located, stored and cleaned. _____

Storage

Please indicate how many areas/rooms will be dedicated for child care center storage? Indicate on plans and describe here:

How/where will chemicals and other hazardous substances be stored? _____

How/where will medications be stored? _____

What type of locks are provided for chemicals and other hazardous substances? (combination, electronic, magnetic, keypad, key or equivalent) _____

Where will employee personal items be stored? _____

What type of cots/mats will be used? (bifold, stackable, etc.) _____

How/where will cots/mats be stored? _____

Where is clean linen storage? _____

Will linens be washed on-site? YES/NO

How/where are children's personal belongings stored (diaper bags, coats, car seats, backpacks, etc.)? _____

How will children's personal items be separated? _____

Will cubbies be provided? YES/NO

Will coat hooks be provided? YES/NO (*If yes, coat hooks must have at least 12 inches separation*)

Where will seasonal items be stored (such as decorations, water play items)? _____

Designated Sick Area

Where is the designated sick area? _____

Describe the location, equipment and which restroom will be used for designated sick area: _____

Water Supply (Please relay this information to your plumber, architect and/or engineer)

**** Water heater(s) must be capable of supplying an adequate amount of water at the proper temperature for all uses, to include: lavatories, sinks, dishwasher, laundry, washing facilities for solid waste containers.**

.2815(e) Hot water used for cleaning and sanitizing utensils and laundry shall be provided at a minimum temperature of 120 degrees Fahrenheit at the point of use. Water in areas accessible to children shall be tempered between 80 degrees Fahrenheit and 110 degrees Fahrenheit. Hot water that exceeds 120 degrees Fahrenheit is a burn hazard and shall not be provided in areas accessible to children.

How many water heaters will be provided? Purpose, location and size of water heaters:

How will tempered (80-110° F) water temperatures be achieved? _____

How will water in excess of 120° F be made inaccessible? _____

Will water fountains be provided/installed? YES/NO (*Drinking fountains shall be separate from handwash lavatories.*)

Location of facilities provided at the child care center for the washing and storage of solid waste containers, mop buckets and mops? _____

**Facilities shall include a faucet with a threaded nozzle that delivers water of at least 80 degrees Fahrenheit. Water in excess of 110 degrees Fahrenheit must not be accessible to children.*

Lighting

- Confirm that lighting fixtures are shatterproof or shielded in food preparation, storage, and serving areas and in all rooms used by children
- Confirm that all work surfaces are provided with 50 foot-candles of lighting
- Confirm that all other areas are provided with 10 foot-candles of lighting

Thermal Environment

- Confirm that all rooms used by children are heated, cooled, and ventilated to maintain an ambient temperature between 65° F and 85° F?
- Confirm that all openings to the area outside of the child care center will be protected against the entrance of flying pests.

Outdoor Learning Environment

Is there any existing chromated copper arsenate (CCA) pressure-treated wood? YES/NO

If yes, detail treatment: _____

- Confirm all sandboxes have covers and are constructed to drain

How will access to utilities (including but not limited to: HVAC units, condensate lines, utility poles, wastewater access and controls) be restricted? _____

Will storage be provided in the outdoor learning environment? YES/NO Specify (storage building, exterior entry storage room, exterior cabinet, etc.): _____

**Equipment that is not intended by the manufacturer to be used by children must be inaccessible as required by .2820.*

Finish Schedule

Please indicate the materials to be used in the following areas:

	FLOORS	WALLS	CEILING
KITCHEN			
DIAPERING AREAS			
FOOD PREPARATION AREAS			
FOOD STORAGE AREAS			
UTENSIL WASHING AREAS			
TOILET ROOMS			
CLASSROOMS			
LAUNDRY ROOMS			

**If acoustic and other absorbent ceiling materials are used, then ventilation to preclude the possibility of grease and moisture absorption must be provided.*

Approval of these plans and specifications does not guarantee or imply compliance with any other code, law, or regulation that may be required.

I certify that the information in this application is correct, and I understand that any deviation without prior approval from the Department may nullify plan approval.

****I understand that written approval of plans must be obtained prior to construction.**

Date: _____

Print Name: _____ **Title:** _____

Signature: _____

*NC Department of Health and Human Services
Children's Environmental Health Unit*

Name of Proposed Child Care _____

Location Address _____ City _____ Zip _____

County _____

Prior to review of Child Care plans, the following must be submitted. Please initial to indicate submittal includes each of the following:

- _____ Completed Application
- _____ Water supply documentation (permits, applications, testing, etc.)
- _____ For wells/ground water supplies serving 25 or more people, documentation of compliance from DEQ (Division of Environmental Quality <https://www.deq.nc.gov/about/divisions/water-resources/drinking-water>), Public Water Supply Section
- _____ Sewage disposal documentation (permits, applications, inspections, etc.)
- _____ Site plan showing specific location of the property, buildings, playground, fencing, parking, utilities, dumpster, etc.
- _____ Floor plan drawn to scale (minimum 1/4" = 1') of facility with the following labeled:
Kitchen, Utility rooms, bathrooms, diaper changing stations, food preparation areas, ice machines, sinks (labeled with use), washer & dryer, cubbies/lockers, storage areas (specify if lockable), sick child area, offices, washing facilities for solid waste containers, classrooms with age group & number of children indicated.
- _____ Equipment specification sheet for all food service and other equipment (refrigerator, water heater, dish machine, stove, exhaust fan, sinks, etc.)
- _____ Plumbing Plan (water supply including temperatures, waste plumbing, floor drains, floor sinks, water heater(s), tempering valves, washing facilities, laundry facilities)
- _____ Proposed Menu (one month minimum)
- _____ Locations of other Chain or Franchise Child Care Center" means a child care center that operates under the same business name and prototype design concept, with common ownership or management:

For Department use only	
<input type="checkbox"/> Date Received: _____	<input type="checkbox"/> Date Reviewed: _____
<input type="checkbox"/> Modification Requested: _____	<input type="checkbox"/> Approved Date: _____
Notes:	

Version 2/1/2024 Facility Name: _____ County: _____
Address: _____