

Time In: 10 : 15  am Time Out: 12 : 00  am Total 1 hr 45 minutes  pm

New  Transitional

Plan Review

AT HOME 704

Name of Establishment

2200 THRIFT RD

Address 1:

Address 2:

CHARLOTTE

NC

28208

City:

State:

ZIP:

AT HOME 704, LLC

Permittee

AARON WEISE

Manager or Person in charge

Mailing Address Same

AT HOME 704, LLC

Mailing Name

6629 BELLS MILL DR

Mailing Address 1

Mailing Address 2

CHARLOTTE

NC

28269

City:

State:

ZIP:

(703) 477-0717

( ) -

(704) 499-3046

Phone

Fax

Emergency Phone Number

A.RON14@YAHOO.COM

Email Address:

60

Mecklenburg

County #

5-5 - Municipal/Community

3-3 - Municipal/Community

III

25

Water Supply

Wastewater System

Risk Category

Territory #

Capacity:

3679

Enter the last 4 digits, 5 if necessary

2 - Food Stands

1

Facility ID

Old Facility ID:

Operate a:

Status Code

07104108

07104108

Permit Date: 11 / 16 / 2020

Map #

Parcel ID #

TFE Expiration Date: / /

35.23404

-80.87284

Lat.

Long.

Push Cart or MFU  Pushcart  MFU

CITY KITCH WEST END, THE

Pushcart/Mobile Food Unit operating in conjunction with:

Restaurant or Commissary ID: 2060019918

Transitional Permit Conditions: Permit Expires: / /

90 days  180 days Non-Compliant items completed by:

Conditions/Remarks

Permits issued may be suspended or revoked by the REGULATORY AUTHORITY for failure to comply with the requirements of the North Carolina General Statutes and rules. • The PERMIT HOLDER shall not add equipment or change menu prior to obtaining approval from the REGULATORY AUTHORITY. This includes a change in the type of food establishment or food operations if determined by the REGULATORY AUTHORITY to be necessary to ensure compliance with the rules.

• Plans and specifications must be submitted for review and approval before any equipment is added or removed and /or

Characters Remaining 1362

Non-Compliant Remarks

Click the checkbox to add non-compliant remarks.

Characters Remaining 4000

EHS Signature:

Establishment Assigned To: 2427-Williams, Suataj T.

Manager/Person in charge

2159-McKenzie,

11 / 16 / 2020

AARON WEISE

11 / 16 / 2020

EHSID

Date:

Title

Date:

Print

Name of Establishment: AT HOME 704 Permittee: AT HOME 704, LLC  
Location Address: 2200 THRIFT RD  
City: CHARLOTTE State: NC Zip: 28208 Manager/Person in Charge: AARON WEISE  
Billing Name: AT HOME 704, LLC County: Mecklenburg  
Billing Address: 6629 BELLS MILL DR  
City: CHARLOTTE State: NC Zip: 28269 Status Code: I  
Email Address: A.RON14@YAHOO.COM Establishment ID: 2060023679  
Phone: (703) 477-0717 Fax: \_\_\_\_\_ Map #: 07104108 Parcel ID: 07104108  
Emergency Phone Number: (704) 499-3046 Lat: 35.23404 Long: -80.87284

Permission is granted to operate a 2 - Food Stands as defined in G.S. 130A-247(l) and 130A-248, Regulation of Food and Lodging Facilities. See permit requirements in Rules. This permit is not transferable and may be revoked for failure to comply with all requirements.

Wastewater Systems:  Municipal/Community  On-Site System Capacity: \_\_\_\_\_ Category #:  0  1  2  
Water Supply:  Municipal/Community  On-Site System  4  
Pushcart/Mobile Food Unit operating in conjunction with: CITY KITCH WEST END, THE / \_\_\_\_\_  
Restaurant or Commissary Name and ID number

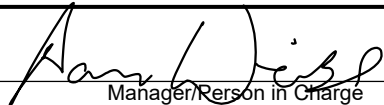
Conditions/Remarks:


Establishment assigned to: 2427-Williams, Suataj T.  
Permit and Non-Compliant Conditions are on the attached addendum....

Attachments

**Transitional Permit Conditions**

This permit shall expire on \_\_\_\_\_ and is not renewable. All non-compliant items listed herein and on attached pages (if applicable) must be completed within  90 /  180 days days. This establishment must close if all noncompliant items are not corrected by the expiration date.

Received By:  Title: AARON WEISE Date: 11/16/2020  
Manager/Person in Charge

Signed By:  REHS#: 2159-McKenzie, Date: 11/16/2020  
Division of Public Health

Purpose: General Statute 130A-248(b) states "No establishment shall commence or continue operation without a permit or transitional permit issued by the Department. The permit or transitional permit shall be issued to the owner or operator of the establishment and shall not be transferable. If the establishment is leased, the permit or transitional permit shall be issued to the lessee and shall not be transferable. If the location of an establishment changes, a new permit shall be obtained for the establishment. A permit shall be issued only when the establishment satisfies all of the requirements of the rules. The Commission shall adopt rules establishing the requirements that must be met before a transitional permit may be issued, and the period for which a transitional permit may be issued. The Department may also impose conditions on the issuance of a permit or transitional permit in accordance with rules adopted by the Commission. A permit or transitional permit shall be immediately revoked in accordance with G.S. 130A-23(d) for failure of the establishment to maintain a minimum grade of C. A permit or transitional permit may otherwise be suspended or revoked in accordance with G.S. 130A-23." Preparation: Local environmental health specialists shall issue a permit every time a change in permit status is indicated. Prepare an original and one copy for: 1. Original to be left with the owner or operator. 2. Copy for the local health department. Disposition: Please refer to Records Retention and Disposition Schedule 8.B.6., for County/District Health Departments which is published by the North Carolina Division of Archives & History. Additional forms may be ordered from: Environmental Health Section, 1632 Mail Service Center, Raleigh, NC 27699-1632, (Courier 52-01-00)

# Comment Addendum - Attachment

Establishment Name: AT HOME 704

Establishment ID: 2060023679

Date: 11/16/2020

Location Address: 2200 THRIFT RD

Status Code: I

City: CHARLOTTE State: NC

Category #: III

County: Mecklenburg Zip: 28208

Wastewater System:  Municipal/Community  On-Site System

Water Supply:  Municipal/Community  On-Site System

Permittee: AT HOME 704, LLC

Telephone: (703) 477-0717

## Conditions/Remarks (continued):

Permits issued may be suspended or revoked by the REGULATORY AUTHORITY for failure to comply with the requirements of the North Carolina General Statutes and rules. • The PERMIT HOLDER shall not add equipment or change menu prior to obtaining approval from the REGULATORY AUTHORITY. This includes a change in the type of food establishment or food operations if determined by the REGULATORY AUTHORITY to be necessary to ensure compliance with the rules.

- Plans and specifications must be submitted for review and approval before any equipment is added or removed and /or remodeling of any part of the FOOD ESTABLISHMENT premises.
- The PERMIT HOLDER shall obtain written approval from the REGULATORY AUTHORITY prior to beginning specialized methods of food processing.
- A PERMIT HOLDER shall immediately discontinue operations and notify the REGULATORY AUTHORITY if an IMMEDIATE HEALTH HAZARD occurs.
- This FOOD ESTABLISHMENT shall comply with cooling per 3-401.14. If proper cooling cannot be supported safely using existing equipment, additional equipment shall be installed to comply with 4- 301.11. -PERMIT HOLDER is using THE CITY KITCH WEST END #019918 as base of operations. All food, equipment, utensils, food preparation associated with catering operation must be prepared and stored at THE CITY KITCH WEST END, 220 Thrift Rd. • All food shall be transported in a manner to prevent contamination and shall maintain temperatures as specified in Chapter 3 of the NC Food Code Manual. • Equipment utilized in catering operations for transporting food shall be maintained clean to sight and touch. Equipment shall be of sound construction and be capable of maintaining the required hot and cold temperatures during transportation. Offsite catering will be denied if it cannot be conducted safely as evaluated by the REGULATORY AUTHORITY.
- Permittee is responsible for using the on-line scheduler at City Kitch West End #019918 for the shared use facility. •In accordance with 15A NCAC 18A .2658, specifically 8-304.11(H), the PERMIT HOLDER shall submit all standard operating procedures as related to their individual operation and shared-use facility upon request to the MCHD. •PERMIT HOLDER has signed acknowledgement of potential risks associated with shared used facilities. Failure to adhere to control measures for those risks, as required by shared kitchen procedures or as required by MCHD, will result in permit action.

-Permittee will provide food service for private catered events and prep food ahead of time as chef for hire business. Permittee will utilize walk-in cooler or blast chiller for cooling TCS foods.

Application approval or issuance of a permit by this department does not negate requirements by Executive Order No. 141, or subsequent Orders in effect. The local health department (LHD) is not the enforcement authority for ensuring mass gatherings abide by the capacity limitations or any other part of the Executive Order.

## Non-Compliant Items: