

Name of Establishment: Divine Taste Cooking Catering Permittee: Divine Taste Cooking LLC
Location Address: 824 N. York Street Manager/Person in Charge: Sharon Scarborough
City: Gastonia State: NC Zip: 28052 County: Gaston
Billing Name: Divine Taste Cooking LLC Status Code: I - New Permit/Opening Sheet
Billing Address: 23038 Clarabelle Drive Establishment ID: 2036020950
City: Charlotte State: NC Zip: 28273 Map #: _____ Parcel ID: _____
Email Address: divinetastecooking@gmail.com Lat: _____ Long: _____
Phone: (704) 337-6096 Fax: _____ Emergency Phone Number: _____

Permission is granted to operate a 2 - Food Stands as defined in G.S. 130A-247(I) 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.

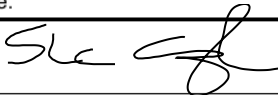
Wastewater Systems: Municipal/Community On-Site Capacity: _____ Category #: 0 1 2
Water Supply: Municipal/Community On-Site 3
Pushcart/Mobile Food Unit operating in conjunction with: GASTON COMMISSARY KITCHENS / 2036020901
Restaurant or Commissary Name and ID number

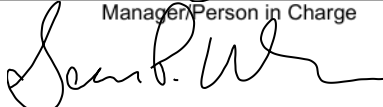
Conditions/Remarks:
Must report weekly using QR Code. Will cool all hot foods in Walk-in Cooler or Ice Bath. This is a meal prep service the will deliver all meals frozen.
The Rules Governing the Sanitation of Food Service Establishments can be accessed online at the following website:
<http://ehs.ncpublichealth.com/rules.htm>
Any permit issued may be suspended or revoked by the REGULATORY AUTHORITY for failure to comply with the requirements of the North Caroling General Statutes and rules regulating this FOOD ESTABLISHMENT.
All replacement equipment or equipment added to the FOOD ESTABLISHMENT shall meet the requirements of 15A NCAC 18A.2654. Plans and specifications must be submitted for review and approval before remodeling of the FOOD ESTABLISHMENT. This includes a change in the type of establishment or food operation if determined by the REGULATORY AUTHORITY to be necessary to ensure compliance with 15A NCAC 18A.2600.
When specialized methods of food processing are use, the PERMIT HOLDER shall obtain prior written approval from the REGULATORY AUTHORITY.
A PERMIT HOLDER shall immediately discontinue operations and notify the REGULATORY AUTHORITY if an IMMINENT HEALTH HAZARD may exist because of an emergency such as fire, flood, extended interruption of electrical or water service, SEWAGE backup, misuse of POISONOUS OR TOXIC MATERIALS, onset of an apparent foodborne illness outbreak, gross insanitary occurrence or condition, or other circumstance that may endanger public health.
Menu is restricted to items approved at time of permitting. Any additions to menu must receive prior approval from REGULATING AUTHORITY.

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:  Owner/Sharon
Title: Scarborough Date: 08/31/2022
Manager/Person in Charge

Signed By:  REHS#: 2539 - White, Sean Date: 08/31/2022
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)