

To: Architects, Owners and or Managers Lodging Establishments

From: Pitt County Environmental Health Food & Lodging Division

Subject: Hotel Lodging Plan Review Application

This application is to be completed for all new, or existing hotels or lodging establishments being built, changing ownership or undergoing a remodel affecting the equipment and or equipment installation in the facility. A fee of \$250.00 will be charged by Pitt County Environmental Health for evaluation and approval of plans. Checks, money orders or cashier checks should be made out to Pitt County. Visa, MasterCard and Discovery cards can also be used to pay the fee. Please complete the multiple pages of the application using the instruction pages attached to the front of the application and submit to:

Pitt County Environmental Health Department  
Attention: Food & Lodging Division  
1717 W 5<sup>th</sup> Street  
Greenville, NC 27834

Be aware that applications shall be submitted at least 30 days prior to construction or ownership changes.

For general questions you can call Pitt County Environmental Health at 252-902-3206. Forms can be sourced from Pitt County Environmental Health.



## PITT COUNTY HOTEL/LODGING PLAN REVIEW SUBMITTAL LIST

The following items shall be submitted with the hotel/lodging application:

- Completed Pitt County Hotel/Lodging Application, Completed Pitt County Food Service Plan Review Application.
- Set of building plans drawn to scale. Plans and specifications should contain:
  - Site plan with locations for dumpster, dumpster pad fencing, entrances and exits, loading and unloading areas, pools and any outside storage buildings.
  - Floor plan including areas of food service, laundry, storage of supplies and equipment. If obtaining a Food Establishment Permit for a franchise please contact:

Environmental Health Section  
Plan Review Unit  
5605 Six Forks Road  
Raleigh, NC 27609  
919-707-5864/Fax 919-845-3973  
Email: [ncplanreview@dhhs.nc.gov](mailto:ncplanreview@dhhs.nc.gov)

Plans for food service should contain a list of specification sheets and labels for each piece of equipment shown on the plan diagrams. Additionally plans should show public bathrooms, gyms, retail spaces, dining, meeting rooms or business conference rooms, chemical storage and lobbies.

- Finish schedule for guest rooms, lobbies, bathrooms, fitness, meeting, storage, laundry and others throughout facility showing floors, walls, ceilings and coved bases.
- Electrical layouts with lighting to meet lighting requirement of 30 foot candles for vanities in rooms and 50 foot candles for food process areas.
- Copies of wastewater and grease interceptors as required by utilities and waste removal contract.
- Pool plans are handled under a separate application but shown on plans.





**WATER SUPPLY - SEWAGE**

1. Is water supply: Municipal  Well  Is wastewater supply: Municipal  Septic

2. Will ice: be made on premises  purchased

3. If ice is made on premises what type of machine will be used? Sealed/dispensed

other  explain: \_\_\_\_\_

4. Describe the plans for water heating capability and monitoring of tempered water where accessible by guests: \_\_\_\_\_  
\_\_\_\_\_

5. Water heater type: tankless  gas  electric   
gallons/min: \_\_\_\_\_ storage capacity: \_\_\_\_\_ recovery: \_\_\_\_\_

**CLEANING OF MULTIUSE (CUPS, GLASSES, ICE BUCKETS) EQUIPMENT**

Manual Warewashing or Sanitizing in Room: **Yes**  **No**

Describe how multiuse will be cleaned and sanitized:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Manual Warewashing in Utility Room: **Yes**  **No**

Size of sink compartments (inches): Length: \_\_\_\_\_ Width: \_\_\_\_\_ Depth: \_\_\_\_\_

What type of sanitizer will be used? Chlorine:  Quaternary:  Ammonium:

Hot Water:  Other (specify): \_\_\_\_\_

Mechanical Warewashing: **Yes**  **No**

Warewashing machine manufacturer and model: \_\_\_\_\_

Type of sanitization: Hot water (180°F)  Chemical

Size of sink compartments (inches): Length: \_\_\_\_\_ Width: \_\_\_\_\_ Depth: \_\_\_\_\_

Hand sink in the Utility room: **Yes**  **No**



**EMPLOYEE ACCOMMODATIONS**

Indicate location for storing employees' personal items:

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**REFUSE AND RECYCLABLES**

1. Will refuse be stored inside? Yes  No

If yes, where

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2. Provision for refuse disposal: Dumpster  Compactor

3. Provision for cleaning dumpster/compactor: On-site  Off-site

If off-site cleaning, provide name of cleaning contractor: \_\_\_\_\_

4. Describe location for storage of recyclables: (cooking grease, cardboard, glass, etc.):

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**SERVICE SINK**

1. Location and size of service sink/can wash: \_\_\_\_\_

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2. Is a separate mop storage area provided? Yes  No  If yes, describe type and location:

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**LAUNDRY**

How will laundry be sanitized: Heat Sanitization  Chemical Sanitization

Indicate how clean and dirty linen storage are segregated:

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Hand sink in the laundry room: Yes  No

**STORAGE OF LINENS**

Square footage of shelf space: \_\_\_\_\_ Type of storage shelves: \_\_\_\_\_

What type of surface? Floor  Walls  Cleanable



**INSECT AND RODENT CONTROL**

1. How is protection provided on all outside doors? Self-closing door  Fly Fan   
Screen Door

2. How is protection provided on windows? Self-closing  Fly Fan  Screening

3. Will a licensed pest control operator be contracted? **Yes**  **No**

4. Will there be a bed bug response plan? **Yes**  **No**

**POISONOUS OR TOXIC MATERIALS**

Indicate all locations of poisonous and/or toxic materials (chemicals, sanitizers, etc.) storage (including working supplies):

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Submit this application and permit fee to:  
Pitt County Environmental Health Department – Food & Lodging Division  
1717 West 5<sup>th</sup> Street, Greenville NC 27834

**Office Use Only**

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reviewer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

