

DEPARTMENT OF PUBLIC HEALTH **Division of Environmental Health**

Operational Statement Mobile Food Preparation Unit

ЕН	Office	Use
	Only	
Appro	oved By:	
Date:		

OWNER INFORMATION

1. Date:	2. Your busin	ness name:	
2 6.6.			
3. Your name:		4. Your address:	5. Your city and ZIP code
3. Tourname.		4. Tour address.	3. Tour City and Zir Code
6. Your home pho	one number:	7. Your cell phone number	Your work phone number
9. Your E-mail ac	ldress:		
10. Commissary r	name	11. Commissary address:	
12. Describe your	overall operati	ion:	

EQUIPMENT INFORMATION

13. How	are the following equ	uipment in the vehicle po	owered?	
a.	Water heater:	☐ gas, ☐ propane,	generato	r, 🗌 inverter, 🔲 other:
			-	
b.	Refrigerator:	□ gas □ propane	Generato	r, 🔲 inverter, 🔲 other:
	reingerator.	gas, proparie,		, Inverter, Guiler.
	Ota a sa Tabila			
C.	Steam Table:	☐ gas, ☐ propane,	□ generato	r, 🗌 inverter, 🔲 other:
14. If you	u have a generator, v	vhere on the vehicle is it	t mounted?	15. How is the power cord installed?
16. Does	s your vehicle have s	hore power (can it plug	into an outle	to power all electrical systems)?
☐ Yes	☐ No			
17. Wha	t make and model is	the:		
a.	Refrigerator:			
a.	ixemgerator.			
_	_			
b.	Generator:			
C.	Freezer:			
d.	Inverter/batteries:			
۵	Water Heater:			
		abricated commercial re	efrigerator, w	hat make and model are the:
a. Compressor:				
h. Hagt Evelopmen				
b. Heat Exchanger:				
C.	Thermostat:	re a hand wash sink?	20 Dags it	have a three correspond sink?
19. Does	the food venicle hav	ve a hand-wash sink?	20. Does it	have a three-compartment sink?
21. Do y	ou have a probe-styl ☐ No	e thermometer?	22. What s	ize in gallons is your hot water heater?
l les				

23. What size in gallons is your clean water tank?	24. What size in gallons is your waste water tank?	
25. Where do you fill and empty your tanks?	26. Do you have a clean water hose to fill your tank with?	
27. How is your clean water hose marked to make sure you don't use it for dirty water?	28. What temperature does your hot water have to be?	
29. Does your hand-wash sink have soap in a dispenser? Yes No	30. Does your hand-wash sink have paper towels in a dispenser? ☐ Yes ☐ No	
31. What equipment does your vehicle have? Check Stove, range, burners Griddle Barbecue grill Mechanical refrigerator Steam table Deep fryer Handwash sink Three compartment sink Other:	all that apply. List equipment not listed.	
32. Do you have mechanical exhaust ventilation (a h etc.? Yes No	ood) over all cooking equipment such as grills, fryers,	
33. Do your hood fans work?	34. Does your hood have an ANSUL?	
35. If so, when was the last time it was serviced?	36. How often do you service it?	
37. Do you have a first aid kit?	38. Do you have a Fire extinguisher rated 10 BC?	
39. When was the last time it was serviced?	40. How often do you service it?	
41. Are all of the surfaces in the vehicle smooth and easy to clean? (No raw wood or uneven edges)		
42. Are all the gaps or spaces around pipes, conduits or hoses sealed and smooth?		
43. Do all windows and doors have screens or closable partitions to prevent entrance of vermin?		

COMMISSARY

44. Does your commissary have adequate space for you to store your food and utensils?		
45. If not, where will you store it?		
46. Does your commissary have a	dequate hand-washing facilities?	
47. Does your commissary have u	tensil washing equipment?	
48. What do you plan on doing at t	the commissary? (Check all that app	oly)
☐ Cooking	Cooling	☐ Baking
☐ Washing utensils	☐ Marinating	BBQing
Storing supplies	☐ Packaging/Labeling	☐ Mixing/blending
Reheating	Storing utensils	☐ Thawing
Other:	L	J
49. Do you understand that you must take your vehicle to be serviced at the Commissary at least every day that you use it?		
50. What time of day are you planning on being at your Commissary?		
<u>OPERATIONS</u>		
TA What kinds of food and drinks do you plan to call O.C.		
51. What kinds of food and drinks do you plan to sell? Give a complete menu.		

52. How many employees do you intend to have?	53. How often do you intend to prepare food?
54. List all facilities, places, and/or vehicles who	ere food will be prepared and stored?
55. Which foods will be prepared at the commis	sary in addition to on the vehicle?
56. Which foods will be prepared on the vehicle	?
57. Where do you obtain your products?	
a. Meat:	
b. Seafood:	
c. Poultry:	
d. Vegetables/Fruits:	
e. Dry Ingredients:	
f. Beverages:	
g. Ice:	
	ck (Do you pick them up or are they delivered?)
59. What days of the week do you intend to ope	erate?
] Thursday, ☐ Friday, ☐ Saturday, ☐ Sunday
60. What hours per day do you intend to operat pm)	e? (example: from 6:00 am to 1:00 pm, then from 4:00 pm to 10:00
61. Where do you plan on operating? Give a lis	st of location(s). Use a separate sheet of paper if needed.

62. Do you serve rice and beans?
63. Do you soak the beans?
64. If you do NOT soak or cook the beans, where do you get the beans?
65. Where do you soak the beans?
oc. Where do you sould the bearing.
66. How long (in hours) do you soak the beans?
oo. How long (iii flours) do you soak the bearts:
67. How to you cook the beans?
67. How to you cook the beans?
68. What equipment do you use to cook the beans?
oo. What equipment do you use to cook the beans?
CO. Where do you cook the heave?
69. Where do you cook the beans?
70 11 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
70. How do you cook the rice?
71. Where do you cook the rice?
72. What equipment do you use to cook the rice?
73. Do you have the proper land use entitlements to operate at the above locations? (Check with the proper zoning offices listed at the end of this document. Provide documentation of land use entitlements.)
74. How are hot food temperatures going to be maintained during your operating hours?
75. How are hot food temperatures going to be maintained during transport when you are driving between sites and your commissary?

76. How are cold potentially hazardous food (meat, dairy, poultry, fish, cut melons, etc.) temperatures going to be maintained during your operating hours?		
77. How are cold food temperatures going to be n between sites and your commissary?	naintained during transport when you are driving	
78. What is the minimum temperature for hot foods?	79. What is the maximum temperature for cold foods?	
80. What kind of sanitizer will you use?	81. How strong does it need to be?	
82. How do you check your sanitizer strength?	83. Do you or an employee have food safety certification?	
84. Who is the person that has food safety certific	cation? 85. From what company?	
86. When did they take the exam?	1	
87. Do you have a plan in place for educating the	other employees/food handlers?	
88. How long is the drive from the commissary to	the area where you intend to operate?	
89. How will you check your food temperatures?	90. What do you do with leftovers?	
91. Do you understand that you cannot prepare fo	ood at your home?	
92. Do you understand that during operations, all food needs to be held, stored, displayed, and served only from the vehicle (You cannot set up a table or a cooking unit outside of the vehicle)?		
93. Do you understand that you cannot park your vehicle in any location except the commissary for longer than one hour unless you have special permits from the City, County, and/or Zoning Department?		
94. Do you understand that you cannot build onto your vehicle, install tables, chairs, awnings, portable toilets, electrical service, etc., unless you have permission to have a permanent location from the City, County, and/or Zoning Department?		
95. What should you do if you lose power to the refrigerator?		
96. What will you do if you have no hot water?		
Notes/Comments:		

Date:

Print Name:____

Sign here:_____