



ST. JOSEPH COUNTY
DEPARTMENT OF HEALTH
Prevent. Promote. Protect.

St. Joseph County Department of Health

Mobile Food Establishment "Plan and Review" Application

Circle One: MFT (Truck) MFE (Trailer) MFE (Other)

Date of Application: _____ New _____ Converted _____ Renovated _____

The "Plan and Review" Application must include standard drawing(s).

Business Name: _____

Mobile Food Establishment Name: _____ License Plate # _____

Make of Mobile Food Establishment: _____ Model: _____ Color: _____

Owner Name: _____

Owner Address: _____

City: _____ State: _____ Zip: _____

Primary Telephone/Contact Number: _____ Fax: _____

E-Mail Address: _____

Commissary Address: _____

Address of Storage Location: _____

Applicants Name if Different from Owner: _____

Title (owner, manager, etc.): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-Mail: _____

Printed Name of Person Completing Application Date

Signature of Person Completing Application

Date Received: _____

For office use only

Application Fee Amount: _____

Transaction # _____

Department Employee: _____

Plan and Review Yes No

To scale drawing/plans Yes No

Menu Yes No

Commissary Agreement Yes No N/A

Equipment spec. sheet Yes No



St. Joseph County Department of Health

“Promoting physical and mental health and facilitating the prevention of disease, injury, and disability for all St. Joseph County residents”

Instructions for Mobile Food Establishment Plan and Review Questionnaire Form:

The enclosed/attached questionnaire is intended to help the individual/business planning to operate a Mobile Food Establishment in St. Joseph County Indiana. A **“Mobile Food Establishment”**, as defined by the St. Joseph County Department of Health (SJCDoH), is a licensed, enclosed, and self contained unit which serves food to the public, while temporarily located at a public or privately-owned location. Food items may be prepared, cooked, and assembled in the mobile establishment or may have been prepared, wrapped/packaged in a licensed commissary or food manufacturing facility.

The term "mobile food truck" **does not include push carts, food delivery vehicles, or mobile ice cream vendors**, a “mobile food truck” is a motorized vehicle. A “Mobile Food Establishment” shall include “mobile food trucks, “mobile food trailers”, and “other” operations that are wheeled, on skids, mounted on a vehicle, or a marine vessel and that has a potable water system under pressure and a permanently installed retention tank for wastewater, when required.

Information is requested about the design, construction, and operation of the Mobile Food Establishment. Some questions may also apply to the food handling activities that may occur both at the commissary and on the mobile food establishment.

Section numbers noted at the end of some questions are in reference to Indiana’s **Retail Food Establishment Requirements Title 410 IAC 7-26**.

Requested information addresses the following:

- Food safety and sanitation
- Food protection and integrity during preparation
- Control of pathogens during hot and cold holding
- Proper use of sanitizers
- Proper storage and use of poisonous or toxic materials
- Ware-washing use and capacity
- Water Supply, sewage disposal, and the wastewater tank
- Backflow, hot water capacity, and grease disposal
- Handwashing & toilet facilities
- Interior wall & floor finishes
- Storage of personal belongings
- Insect and rodent prevention
- Refuse and recyclables storage and disposal
- Light intensity requirements

The individual or business, operating a Mobile Food Establishment, is required by the SJCDoH to hold **both a Mobile Food Establishment permit and a commissary permit (documentation of an approved servicing area may be approved in certain circumstances)**.

The Plan and Review Application (page 1) must be submitted with the completed questionnaire (pages 3 – 9). Please contact the St. Joseph County Department of Health at 574-235-9750 if further assistance is needed when completing these documents.



ST. JOSEPH COUNTY
DEPARTMENT OF HEALTH
Prevent. Promote. Protect.

St. Joseph County Department of Health

“Promoting physical and mental health and facilitating the prevention of disease, injury, and disability for all St. Joseph County residents”

**All information must be completed in its entirety per 410 IAC 7-26.
Incomplete plans will not be reviewed.**

- Please answer all questions and return this form and the application to our office.
- Contact our office at **574-235-9750** if you have any questions.
- This questionnaire is designed to be a guideline and may not be a complete list of requirements.
- The sanitation requirements noted in this document are specified under the Retail Food Establishment Sanitation Requirements Title **410 IAC 7-26**. Please use this referenced IDOH rule as it pertains to section numbers found at the end of some questions.

If applications/plans/license requests were submitted to any of the departments listed below, please provide the date(s):

City: _____ Zoning: _____

Fire: _____ Building: _____

DTSB: _____ Department of Transportation: _____

Total Square Feet: _____ Mobile Food Establishment Interior: _____ Commissary: _____

Provide information for the Certified Food Protection Manager certified in food safety (Title 410 IAC 7-22):

Name: _____ Certificate number: _____

Company: _____ Certificate Expiration Date: _____

How will employees be trained in food safety (Section 136)? _____

Has the following information been included?

A to-scale drawing/plan of the interior, including location of equipment Yes _____ No _____

List of all equipment..... Yes _____ No _____

Complete list of menu items to be served..... Yes _____ No _____

Proposed location/route Yes _____ No _____

Signed Commissary Usage Agreement if licensed facility owned by someone else. Yes _____ No _____ N/A _____

Toilet facilities accessibility..... Yes _____ No _____

Answer the following questions as they pertain to the Mobile Food Establishment operations.

Equipment

1. The food preparation area must be separated from the cab of the Mobile Food Establishment. Explain how the cab is separated from the food prep area and describe the materials used in construction of the separation (**Section 428**)

2. Will all equipment meet design and construction requirements for the American National Standards Institute (ANSI) or meet (**Section 226**)? Yes _____ No _____
3. Will the utensils and food storage containers be made from food-grade quality materials (**Section 226**)? Yes _____ No _____
4. Are only single service, prewrapped utensils available for use by customers? Yes _____ No _____
5. Please list any used equipment that will be utilized.

6. A commercial mechanical ventilation hood system sufficient for the operation is required at or above all ranges, griddles, deep fat fryers and similar equipment (**Section 276**). Does the Mobile Food Establishment have a ventilation hood system? Yes _____ No _____ N/A _____
Has the Fire Department certified that the system is sufficient for the needs of the Mobile Food Establishment (**Section 276**)? Yes _____ No _____
7. Is all equipment used for the storage of Time/Temperature control for safety (TCS) foods adequate to meet required temperatures of **135°F or above for hot foods and 41°F or below for cold foods?** (**Section 213**)
Yes _____ No _____ N/A _____
8. Please list equipment to be used for hot and cold holding of foods; including any to be used during transporting or serving (**Section 213**).

Ice chests may not be used for cold storage of Time/Temperature control for safety (TCS) food items.

9. Are all refrigeration unit(s) equipped with thermometers (**Section 260**)? Yes _____ No _____

Food

10. List all food suppliers, including those that provide ice (**Section 155**). _____

11. What is the procedure for receiving food deliveries (**Section 162**)? _____

12. How often will food be delivered? _____
13. Where will food deliveries be received? _____

14. Who will be responsible for checking food temperatures and inspecting food deliveries to ensure products are not damaged, food integrity has not been compromised, and that food has not been temperature abused?

15. List any foods that will require thawing before cooking. Indicate which process will be used to thaw the food and specify whether the preparation will be done at the commissary or on the Mobile Food Establishment. (**Section 210**)

PROCESS	FOOD	COMMISSARY	MFE
Refrigeration			
Running Water less than 70 °F			
Microwave as part of the cooking process			
Cook from frozen			
Other (describe)			

16. List any food(s) that will require cooling. Indicate the process that will be used to cool each item (i.e. leftovers.) and specify whether cooling will be done at the commissary or on the Mobile Food Establishment. (**Section 211, 212**)

PROCESS	FOOD	COMMISSARY	MFE
Shallow pans under refrigeration			
Ice and water bath			
Reduced volume (quartering a large roast)			
Ice paddles			
Rapid chill devices (blast freezer)			
Other (describe)			

17. What procedures will be used for foods that may require reheating before being placed into service on the Mobile Food Establishment (**Section 206**)? _____

18. Who will take and record food temperatures on the Mobile Food Establishment (**Section 136**)? _____

19. If cooked food is leftover at the end of the serving period, how will it be handled?

20. How will food be protected from cross-contamination (**Section 175**)? (i.e. raw animal foods and ready-to-eat foods or other ready-to-eat foods, such as vegetables; and cooked ready-to-eat foods)

Ware-washing/Dishwashing

21. Is a 3-compartment sink with drain boards on each end provided?
Yes _____ No _____
22. Is each compartment large enough to submerge the largest piece of equipment into the 3-compartment sink
(Section 274)? Yes _____ No _____ N/A _____
22. Describe how equipment too large to be submerged into the 3-compartment sink will be cleaned and
sanitized. _____

Sanitization

24. What type of chemical sanitizer(s) will be utilized (Section 299)?
Chlorine (unscented) liquid _____ tablet _____
Quaternary ammonium liquid _____ tablet _____
Other: _____
25. Are appropriate chemical test kits/papers provided for all types of chemical sanitizers to be used
(Section 281)? Yes _____ No _____

Handwashing/Toilet Facilities

26. A handwashing sink is to be provided and accessible in food preparation and dishwashing areas.
(Section 356): How many hand sinks are provided? _____
27. Is the hand washing facility equipped to provide water having a temperature of a least eighty five (85)
degrees Fahrenheit (Section 347)? Yes _____ No _____
28. Is there a physical barrier or adequate separation (2 feet or greater) of the hand-sink and any preparation or
ware-washing sinks? Yes _____ No _____
29. Are restroom facilities accessible during the hours of operation (Section 439)? Yes _____ No _____
(Include a restroom agreement if applicable)

Water Supply

30. Where will potable water be obtained? _____
Is the water supply public (____) or private (____)?
31. If private, has the source been tested (Section 339)? Yes _____ No _____
Provide the date of the most recent test. _____
32. What is the capacity of the water tank? Gallons _____
Is the water tank constructed of food grade material? Yes _____ No _____
Is the water tank sloped to an outlet to allow complete drainage of the tank? Yes _____ No _____

Wastewater/Sewer Disposal

33. How will wastewater be removed from the Mobile Food Establishment? _____

34. What is the size of the wastewater holding tank? Gallons _____
(Tank must be at least 15% larger than the water tank and permanently installed)

35. Is the wastewater tank equipped with a shut-off valve (section 378)? Yes _____ No _____

36. Is the drain for sewage disposal one (1) inch in diameter or greater? Yes _____ No _____

37. If used, what is the process for disposing of grease? _____

Plumbing

38. Are hot and cold water fixtures provided at every sink (Section 342)? Yes _____ No _____

39. Is the potable water supply hose made from food-grade materials (Section 370)?
Yes _____ No _____

40. Is the water heater enclosed in an accessible cabinet or other smooth easily cleanable structure?
Yes _____ No _____

41. What are the recovery rate and capacity of the hot water heater (Section 341)?

Fixture			Water Supply			Sewage Disposal		
	AVB	PVB	VDC	HB	Air Gap	Air Break	Air Gap	Direct Connect
3 Compartment Sink								
Hand Sink								
Prep Sink								
Hose Connections								
Other								
AVB=Atmospheric Vacuum Breaker				HB=Hose Bib Vacuum Breaker				
PVB=Pressure Vacuum Breaker				VDC=Vented Double Check Valve				

Room Finish Schedule

(The materials that will be used in the construction of the interior of the Mobile Food Establishment)

42. Please describe the materials used in the construction of the following on the Mobile Food Establishment.
(Section 409).

AREA	FLOORS	COVING	WALLS	CEILING
Interior				
	Wood flooring is not allowed.			

Lighting

43. Is the lighting in food preparation and dishwashing areas at least 50-foot candles (**Section 436**)?

Yes _____ No _____

44. Are light bulbs shielded, coated, or otherwise shatter-resistant (**Section 417**)? Yes _____ No _____

45. What is the power source for the Mobile Food Establishment? _____

46. If electricity is required, how will the electrical supply be connected to the Mobile Food Establishment?

Personal Belongings

47. Describe how/where personal belongings such as coats, purses, medicines, and lunches will be stored.

(**Section 440, 472**) _____

Insect and Rodent Harborage

48. Will screens be provided on any open windows/doors to the outside (**Section 421**)? Yes _____ No _____

49. Will air curtains be installed? If so, where will the curtains be installed (**Section 421**)?

50. Will all pipes and electrical conduit cases be sealed (i.e. ventilation systems, exhaust and intake be protected) (**Section 422**)? Yes _____ No _____

Refuse and Recyclables

51. Describe how garbage/solid refuse will be stored and where it will be disposed of (**Section 388**)?

52. Where will recyclables be stored prior to pick-up? _____

Poisonous or Toxic Materials and Personal Care Items

53. List any poisonous or toxic materials that will be used on the Mobile Food Establishment.

54. Where will these be stored (**Section 457**)? _____

55. Are all working containers, used for storing poisonous or toxic materials, clearly and individually marked (**Section 456**)? Yes _____ No _____

56. Will any insecticides or rodenticides be used (**Section 458**)? Yes _____ No _____

If yes, what will be in place to ensure that chemicals are applied in a safe manner and that the chemicals used will only be those allowed in a retail food establishment (**Section 459**)?

**The following fee schedule as established by the St. Joseph County Board of Health and hereby approved by
the Board of Commissioners of St. Joseph County.**

Resolution R-C-6-05

**Plan and Review/ Application Fees for Food Establishments
(this includes the \$75.00 Administrative Fee)**

Under 3,000 Square Feet	\$100.00
3,001 to 30,000 Square Feet	\$180.00
30,001 to 40,000 Square Feet	\$260.00
40,001 to 60,000 Square Feet	\$340.00
60,001 Square Feet and over	\$400.00