



West Hartford-Bloomfield Health District
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(860) 561-7900 phone / (860) 561-7918 fax

**MOBILE FOOD ESTABLISHMENT
PLAN REVIEW APPLICATION FOR FOOD LICENSE**

**Plan Review Fee: Class 1 \$300
Class 2, 3, 4 \$400**

Instructions:

This plan review application must be completed to the best of your ability and submitted to the West Hartford-Bloomfield Health District for review prior to operating a Mobile Food Establishment (MFE).

In addition, a plan of the Mobile Food Establishment (Appendix IV) and a plan of the servicing area (Appendix II) must be provided for review.

Name of MFE: _____

Name and Address Printed on the MFE (For Customer Identification)

Vehicle License Plate Number: _____

Name of Owner/Operator: _____

Address: _____

Email: _____

Telephone Number: _____

Type of MFE (circle one): Self-Sufficient Vehicle or Trailer
 Vehicle or Trailer that is not Self-Sufficient
 Push-Cart
 Pre-Packaged, Non-PHF/TCS Push-Cart
 Other (describe): _____

Name, Address, Telephone Number for the Servicing Area:

Describe the location of the MFE in relation to the Servicing Area:

Locations, Days and Approximate Times the MFE will stop to service its customers:

Anticipated Numbers of Meals/Servings per Day: _____

List the name of the Qualified Food Operator (QFO) who will be present at the MFE during its hours of operation:

List the name of the Qualified Food Operator (QFO) who is responsible for the operation of the Servicing Area:

List ALL food and beverage items to be prepared and/or served at the MFE. Attach a separate menu sheet if necessary. (Note: Any changes to the menu must be submitted to and approved by the WHBHD prior to their service.): _____

List ALL of the food and beverage items to be prepared while the Servicing Area:

Identify the sources for all food items. Include the source of the ice.

Will all foods be prepared at and stored on the MFE?

YES Complete Appendix V, Food Preparation at the MFE

NO Complete Appendix III, Food Preparation at the Servicing Area and Appendix V Food Preparation at the MFE and describe how the food will be transported to the MFE

How will food temperatures be monitored at the MFE? _____

List the equipment and procedures that will be used at the MFE to maintain temperatures of PHF/TCS foods: _____

Specifically identify how ready-to-eat foods will be protected from raw foods of animal origin during storage, transportation, preparation by food workers, and cooking at the MFE:

How will food and related items that are not temperature sensitive (paper products, utensils, etc.) be stored at the MFE? _____

Describe the location and set-up of the handwashing facility to be used at the MFE:

Identify the source of the potable water supply and describe how water will be provided to the MFE. If a non-public water supply is to be used, provide the results of the most recent water tests. _____

Identify how, how often, and how much water will be provided to the MFE. Specify the location, number, and volume of any potable water tanks to be used. Describe the procedures for cleaning and refilling the tanks. _____

Identify the location, source, and capacity of the hot water supply for the MFE:

Describe where utensil washing will take place. Describe where extra supplies of clean utensils will be stored: _____

Identify which sanitizer(s) will be used at the MFE and where they will be stored:

Describe how and where wastewater from handwashing and utensil washing will be collected, stored, and disposed of:

Identify the location of toilet facilities for the MFE workers: _____

Describe the number, location, and types of garbage disposal containers at the MFE:

Identify how, when, and where the garbage disposal containers will be emptied:

Describe the structure of the MFE (floors, walls, overhead protection, surfaces, and general facilities for food protection): _____

Describe how electricity, gas, propane, and other utilities will be provided to the MFE:

Please add any information about the MFE & Servicing Area that should be considered:

Statement: I hereby certify that the above information is correct and I fully understand that any deviation from the above without prior permission from the WHBHD may nullify final approval.

Signature(s): _____

Printed Name(s): _____

Date of Submission: _____

Approval of these plans and specifications by the WHBHD does not indicate compliance with any other code, law, or regulation that may be required (federal, state, or local). Furthermore, it does not constitute endorsement or acceptance of the completed MFE (structure or equipment). A pre-opening inspection of the MFE with equipment in place and operational will be necessary to determine if it complies with the local and state laws governing MFEs.

APPENDIX II

Floor Layout--Servicing Area

In the following space, provide a scaled plan layout of the Servicing Area. Identify and describe all equipment including cooking equipment and hot and cold holding equipment, handwashing facilities, work tables, dishwashing facilities, food and single service storage, garbage containers, the potable water supply, and waste water disposal system at the Servicing Area.

Appendix III

List each food item and its preparation procedures that will take place at the Servicing Area.

FOOD	THAW How? Where?	CUT/WASH/ ASSEMBLE How? Where?	COLD HOLDING How? Where?	COOK How? Where?	COOLING How? Where?	REHEATING How? Where?	DELIVERY TO THE MFE

APPENDIX IV

Proposed Floor Layout--Mobile Food Establishment

In the following space, provide a scaled plan layout of the MFE. Identify and describe all equipment including cooking equipment and hot and cold holding equipment, handwashing facilities, work tables, dishwashing facilities, food and single service storage, garbage containers, and customer service areas.

APPENDIX V

Food Preparation at the MFE

List each food item and its preparation procedures that will take place on the MFE.

FOOD	THAW How? Where?	CUT/WASH/ ASSEMBLE How? Where?	COLD HOLDING How? Where?	COOK How? Where?	COOLING How? Where?	REHEATING How? Where?	COMMERCIAL PRE- PACKAGED ITEM