



Environmental Health Division
85 East 1800 North
North Logan, UT 84341
Telephone 435-792-6570
Fax 435-752-1570

So you want to open a food truck/trailer?

Here's the checklist of things that need to be done before you can be open for operation to the public.

1. Plan Review

- a. Fill out and submit the plan review application, parts A & B, along with the applicable fee. With the application, submit construction plans of the mobile truck/trailer complete with plumbing, electrical, finishing, floors, walls, ceilings, and floor plan designs. A legible hand-drawn document is okay.
- b. The floor plan designs should designate equipment placement.
- c. An equipment schedule (including cut sheets).
- d. A complete list of menu items to be served (including daily specials, if applicable).
- e. A picture of the license plate on the truck/trailer.
- f. A written and signed commissary kitchen agreement (this will need to be renewed annually).
- g. The means by which the assigned inspector can determine the food truck/trailer's vending location and days/hours of operation (social media pages are common).

2. All Tier 2 designated food trucks/trailers shall have someone on staff that has a Food Safety Manager Certification (Title 26, Chapter 15a of Utah Code). This person can not be the food safety manager of any other establishment. A Food Safety Manager Certification is different from a food handler's permit in that it requires a higher level of education and training and involves taking an extensive course in food safety.

- a. Submit a copy of this certificate to the health department to be registered with the facility.
- b. Each employee (except for the Food Safety Manager (FSM)) must have a food handler permit issued by an approved instructor as determined by the Utah Department of Health.
- c. Tier 1 designated food trucks/trailers are not required to have a Food Safety Manager Certification; however, all employees must have a food handler permit, as explained above.

3. Final Inspection

- a. No establishment shall open without a pre-opening inspection being done.

These requirements apply to all new mobile food trucks/trailers, either newly constructed or a used truck/trailer, and to all changes of ownership. All of the applications and additional information can be found in this New Establishment and Information Packet. Additional fees may be levied for incomplete applications or plans. Please contact the Bear River Health Department with any questions.

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Differences between a Food Cart and a Food Truck/Trailer as defined in R392-102:

“Food Cart” means: (a) a cart that is not motorized; and (b) that a vendor, standing outside of the frame of the cart, uses to prepare, sell, or serve food or beverages for immediate human consumption; or (c) a motor vehicle that a vendor, standing outside of the frame of the vehicle, uses to sell or serve prepackaged food or beverages for human consumption.

“Food Truck” means a fully encased food service establishment: (i) on a motor vehicle or on a trailer that a motor vehicle pulls to transport; and (ii) from which a food truck vendor, standing within the frame of the vehicle, prepares, cooks, sells, or serves food or beverages for immediate human consumption. “Food Truck” does not include a food cart, a shaved ice establishment, or an ice cream truck.

A food cart is required to follow almost all regulations listed in this packet, including having access to a commissary kitchen. Some requirements may be exempt with an approved alternate plan from the Bear River Health Department. A food truck/trailer is required to follow all regulations listed in this packet, including having access to a commissary kitchen. Exemptions are very rarely allowed for food trucks/trailers.

Mobile Food Truck/Trailer Plan Checklist

This list is not comprehensive and is meant only to give direction when planning

1. Floors
 - a. Kitchen, preparation, and storage areas must be of smooth, cleanable construction such as stainless steel, aluminum diamond plate, vinyl, poured epoxy, or other acceptable type floors.
 - b. Floor-wall junctures must be coved and sealed.
2. Walls
 - a. Kitchen, preparation, and storage area walls must be of smooth, cleanable, durable, and non-absorbent construction. Light-colored walls are preferred. In kitchen areas fiberglass reinforced plastic (FRP), stainless steel, or epoxy paint are preferred.
 - b. All splash areas must have equipment fixed and sealed to adjoining walls to prevent moisture and debris from collecting behind the equipment. This includes all sinks.
3. Hand Washing
 - a. The placement of hand washing stations must be approved by the Bear River Health Department during the plan review process.
 - b. At least one sink dedicated to hand washing must be provided.
 - c. Must be convenient and easily accessible.
 - d. Must have hot and cold water through a mixing tap under pressure.
 - e. Must have soap and approved sanitary hand drying provided.
 - f. A splash guard (or adequate space) is required to separate handwashing and food preparation areas.
4. Ware Washing
 - a. A 3-compartment sink is required in the truck/trailer regardless of the use of the commissary kitchen dishwashing facilities.
 - i. Must be NSF approved or equivalent.
 - ii. Must be equipped with hot and cold water under pressure.
 - iii. Must be large enough to submerge the largest equipment or utensil used on the truck/trailer.
 - iv. Must be filled by a faucet installed on the food truck.
 - b. Drain boards or utensil racks must be large enough to accommodate all soiled and cleaned items.
5. Food Preparation Sinks
 - a. Must be NSF approved or equivalent.

6. Cooking/Grilling Equipment
 - a. Must be vented with cleanable filters in compliance with local, state, and federal laws.
7. Food Equipment
 - a. Must be NSF approved or equivalent.
 - b. Must be commercial grade.
 - c. Equipment must be secured to walls and/or floors
8. Storage
 - a. All storage must be at least 6" above the floor.
 - b. Storage shelves must be smooth, easily cleanable, durable, and non-porous.
 - c. Separate storage for cleaning chemicals and other toxins must be provided.
 - d. Food storage must be adequate, determined by the frequency of deliveries and menu variety.
9. Water Supply and Storage
 - a. The onboard potable water tank must be a minimum of 30 gallons as measured down from the inlet.
 - b. Only a dedicated food-grade water hose can be used to fill the potable water tank from an approved culinary water source.
 - c. The onboard greywater tank must be a minimum of 15% larger than the onboard potable water tank as measured down from the inlet.
 - d. The food truck must be equipped with a dedicated waste hose for greywater which is emptied at an approved location.
10. Restrooms and Living Quarters
 - a. A food truck cannot be equipped with restroom facilities, a shower, or living quarters.
 - b. A restroom agreement should be in place for any vending locations.
11. Self-Service
 - a. Self-service counters or tables need to have a canopy/awning covering to protect from environmental contamination.
 - b. Self-service should be limited to condiments in squeeze bottles, eating utensils and napkins, and commercially packaged drinks or food.
12. Hot/Cold Holding
 - a. Must meet temperature requirements:
 - i. Cold foods must be held at 41°F or below
 - ii. Hot food must be held at 135°F or higher
 - b. A thermometer is required in all cold holding units (even if there is a thermometer measuring device on the outside of the unit).
 - c. A stem thermometer is required on the truck at all hours of operation.
13. Garbage - Inside
 - a. Waste receptacles must be durable, cleanable, insect- and rodent-resistant, leak proof, and non-absorbent.
 - b. Waste receptacles must be emptied at the end of daily operation.
14. Garbage - Outside
 - a. All containers must have tight-fitting lids or covers.
 - b. The container storage area must be hard-surfaced and cleanable.
 - c. Containers must be cleaned at frequent intervals.
15. Lighting
 - a. Must be shielded, coated, or otherwise shatter resistant in areas where there is exposed food, clean equipment, utensils, or linens.
 - b. Must be sufficient lighting to safely prepare and cook all foods.
16. Surfaces
 - a. Food contact and splash surfaces must be smooth, easily cleanable, durable, and non-porous.

17. Floor Cleaning

- a. Floor cleaning should be done with a wet Swiffer, a Shark Steamer, sprayed out with a hose, or other similar approved method.

18. Vermin and Pests

- a. All outer openings must be sealed to the outside.
- b. Screens are required on all openable windows, and there cannot be any openings to allow pests or vermin entrance from the outside.

19. Business Name

- a. The business name must be printed on the outside of the food truck (preferably on at least 3 sides). The business name must match the “DBA” provided in the application.
- b. The printed letters for the business name must be at least 4 inches in height.

20. Other

- a. The operator cannot prepare foods on the food truck using “specialized processing methods” as described in the currently adopted FDA Food Code incorporated by reference in Rule 392-100.
- b. The food truck must be equipped with an adequate electrical power source during all hours of operation.

21. Commissary Kitchen Requirements

- a. The commissary kitchen must be a food service establishment permitted by the Bear River Health Department.
- b. The food truck must return to the commissary at a regular frequency, as determined and approved by the Bear River Health Department.
- c. At the end of daily operations, the operator must park the food truck at a location previously approved by the Bear River Health Department.
- d. No food, single-use items, or equipment may be stored or cleaned at a home residence.
- e. The commissary must keep daily records (sign in/sign out).
- f. The commissary must have a 3-compartment sink and/or approved ware-washing equipment.
- g. The commissary must have a separate hand washing sink supplied with proper soap and drying agent.
- h. The commissary must provide each applicable food truck operator with adequate space for the storage of food and food equipment.
- i. The operator of the food truck/trailer must renew the commissary agreement annually.
- j. If a commissary kitchen’s food service permit is terminated, revoked, or suspended, all associated food truck permits are also suspended immediately.

Secondary Mobile Permits

This application allows you to obtain a primary mobile permit, and will allow you to operate anywhere in Box Elder, Cache, or Rich counties in Utah. If you wish to operate in another county in Utah, you will need to contact that health department jurisdiction to apply for a secondary mobile permit. All secondary mobile permits will expire on the same day as the primary mobile permit. No additional inspection is required; you’ll need to show your primary mobile permit and fill out that health department’s secondary mobile permit application and pay the associated fee.

Your primary mobile permit should be located in the health department jurisdiction where most of your work occurs, and where your commissary kitchen is located. If you are further than a four hour drive from your operation location to your commissary kitchen, a second commissary kitchen may be required or other special requirements may be put in place.

Health departments in Utah with their county jurisdictions are listed below:

Bear River Health Department (Box Elder, Cache, and Rich)
Central Health Department (Juab, Millard, Piute, Sanpete, Sevier, and Wayne)
Davis County Health Department (Davis)
Salt Lake County Health Department (Salt Lake)
San Juan County Health Department (San Juan)
Southeast Health Department (Carbon, Emery, and Grand)
Southwest Health Department (Beaver, Garfield, Iron, Kane, and Washington)
Summit County Health Department (Summit)
Tooele County Health Department (Tooele)
Tri-County Health Department (Daggett, Duchesne, and Uintah)
Utah County Health Department (Utah)
Wasatch Health Department (Wasatch)
Weber-Morgan Health Department (Morgan and Weber)

CONTENTS AND FORMAT OF PLANS AND SPECIFICATIONS FOR PLAN REVIEW

(Digital copies need to be in a .pdf format)

1. Provide plans that are a minimum of 11 x 14 inches in size including the layout of the floor plan accurately drawn to a minimum scale of 1/4 inch = 1 foot.
2. Include: proposed menu, equipment cut sheets, plumbing schedule, mechanical schedule, electrical schedule, dimensional floor plan, finish schedule for floors, walls, and ceilings, and an equipment layout and schedule. Each piece of equipment must be clearly labeled on the plan with its common name.
3. Label and locate separate food preparation sinks and hand washing sinks.
4. Include and provide specifications for the following:
 - a. Entrances/exits and windows.
 - b. Complete finish schedules for each room including floors, walls, ceilings, and coved juncture bases;
 - c. Plumbing schedule including the location of floor drains, floor sinks, water supply lines, overhead waste-water lines, hot water generating equipment with capacity and recovery rate, backflow prevention, and wastewater line connections;
 - d. Lighting schedule with protectors.
 - e. Cut sheets of all equipment to be used. All equipment must be NSF compliant or equivalent.
 - f. Complete the Mobile Food Establishment Application form.
5. It is recommended that the drawings include a “bird’s eye” view, and mid-level of all four interior walls.

Used/New Food Equipment

All food equipment must be NSF approved or have an equivalent certification in order to ensure that all food equipment meets the requirements of the Utah Food Code (R392-100). This means that the equipment will either bear the NSF mark or a marking from ETL (Semko Environmental Test Laboratory), UL (Underwriters Lab) Sanitation, or CSA (Canadian Standards Association).



Note that UL, ETL, and CSA marks all need to say 'sanitation' or 'classified' on them. These organizations also certify equipment to different standards for other areas of certification apart from food safety and sanitation and as such will have different marks. Any NSF mark is sufficient.

Many new operators purchase used food service equipment in starting up a facility in an attempt to save money. While most food service resale companies are legitimate, it is important to ensure that used equipment meets the Utah food code requirements.

It is the responsibility of the food service facility owner to obtain the proper food service equipment. You must also provide documentation to the Bear River Health Department that the equipment meets the code. This is done with equipment cut sheets, which will bear one or more of the above marks showing compliance with the NSF standards.

If the supplier is unable to supply cut sheets for the used equipment, other documentation must be provided to the department to confirm that the equipment meets current standards. It is not the responsibility of the health department to do this research. If no such documentation is provided, the equipment will not be allowed for use.

Additionally, food service equipment designed for home use will not be allowed for commercial use. Residential appliances (dishwashers, refrigerators, ovens, mixers, etc.) are designed for occasional use and are not meant to meet rigid commercial standards. Commercial equipment is designed to meet the demanding use of a commercial establishment.

If there is a change of ownership in a food service facility, any food service equipment that does not meet these standards must be replaced with approved equipment before the facility will be permitted to operate.



Food Safety Manager Certification

“Each food service establishment in the state of Utah shall be managed by at least one full-time certified food safety manager at each establishment site, who need not be present at the establishment site during all its hours of operation” (Utah code 26-15a-104(1)).

A food safety manager course provides a more in-depth training in food safety. This helps to ensure that managers at food service establishments are aware of what food safety practices need to be followed. Establishments managed by someone with this certification tend to do better on inspections than those without this training.

There is some confusion over this certification and the food handler card. Every food service worker must have a food handler card. A food safety manager certification only needs to be held by one person per establishment. While the Bear River Health Department does issue food handler cards, it does not provide any food safety manager training or certification. A copy of this certificate needs to be submitted to the health department.

Food safety manager courses must be approved by the Utah Department of Health before being accepted by the Bear River Health Department. Certificates from these entities are approved*:

1. National Registry of Food Safety Professionals (FSP)
<http://www.nrfsp.com/>
2. Utah State University Food Safety Manager’s Certification Course
<http://extension.usu.edu/foodsafety/htm/fsmc>
3. Prometric, Inc.
<https://www.prometric.com/en-us/clients/foodsafety/Pages/landing.aspx>
4. National Restaurant Association (ServSafe)
<https://www.servsafe.com/>
5. ANSI-CFP Approved Organizations
<https://www.ansi.org/Accreditation/credentialing/personnel-certification/food-protection-manager/ALLdirectoryListing?menuID=8&prgID=8&statusID=4>
6. 360 Training (Learn2Serve).com, Inc.
<http://www.learn2serve.com/food-manager-certification/>

*For the most current list of all approved entities visit:

http://health.utah.gov/epi/community/sanitation/foodSafety/food_safety_managerCert

Certifications from FSP or ServSafe can be obtained through Rex Davidsavor at Bridgerland Applied Technology College. He can be reached at 435-750-3237.



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Food Handler's Classes

All food employees who work in the food service industry are required to obtain a Food Handler's Permit from the Bear River Health Department.

Food Handler classes last approximately 90 minutes and are offered at three locations regularly. Permits are valid for 3 years from the date of the exam.

Go to www.brhd.org for more information.

Food Handler Classes are taught at:

Logan Office:	85 East 1800 North Call 435-792-6570 for more information.
Brigham City Office:	800 West 992 South Call 435-695-2065 for information
Tremonton Office:	440 West 600 North Call 435-257-3318 for information
Rich County Office:	115 South Bear Lake Blvd, Garden City

On-site classes can be arranged by calling the telephone numbers listed.

Online classes are also available through approved providers. For a list of approved online classes, visit www.brhd.org



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Plan Review Application Part A

Please Print

Date ___/___/___

Facility Information:

Seating Capacity: _____

Establishment Name: _____

Address: _____

Street City State ZIP code

Email: _____ Website: _____

Phone (____)____-____ Alt. Phone (____)____-____ Fax (____)____-____

Architect/Design Professional: _____ Pre-Constructed _____ Custom Build

Name: _____ Company: _____

Project Contact:

Name: _____ Company: _____

Address: _____

Street City State ZIP code

Email: _____ Website: _____

Phone (____)____-____ Alt. Phone (____)____-____ Fax (____)____-____

Projected Project Completion Date: ___/___/___

The following information is required before a plan review will be started. Incomplete plans not meeting the following requirements may be subject to additional fees.

- Site plan Mechanical Schedule
Dimensional Floor Plan Plumbing Schedule
Proposed Menu Electrical Schedule
Equipment Layout and Schedule Equipment Cut Sheets

For Office Use Only
Plan Review Fee \$ _____ Received by: _____ Date: ___/___/___
Incomplete Plans \$ _____ Date Est. Created ___/___/___ Est. Number: _____



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Plan Review Application Part B

7 pages

To be completed and submitted with the Plan Review Application Part A

Date: _____

NEW ____ REMODEL ____ CONVERSION ____ CHANGE OF OWNERSHIP ____

Name of Establishment: _____

When were plans submitted to the following authorities:

_____ City/County Business License Division
_____ Planning/Zoning
_____ Building
_____ Fire
_____ Other (Please list): _____

Projected Date for Start of Project: _____

Projected Date for Completion of Project: _____

FOOD PREPARATION REVIEW

Proposed Hours of Operation:

Sun: _____ Mon: _____ Tues: _____ Wed: _____ Thurs: _____ Fri: _____ Sat: _____

*Expected Number of Meals To Be Served Daily At:

Breakfast: _____ Lunch: _____ Dinner: _____

*It is important to know this information. With this, we will know how much space will be needed for refrigeration and dry storage.

FOOD SUPPLIES:

Check categories of Potentially Hazardous Foods (PHF's) to be handled, prepared, and served.

CATEGORY	(YES)	(NO)
A. Thin meats, poultry, fish, eggs (hamburger; sliced meats; fillets)	()	()
B. Thick meats, whole poultry (roast beef; whole turkey, chickens, hams)	()	()
C. Cold processed foods (salads, sandwiches, vegetables)	()	()
D. Hot processed foods (soups, stews, rice/noodles, gravy, chowders, casseroles)	()	()
E. Bakery goods (pies, custards, cream fillings & toppings)	()	()
F. Other _____		

1. Are all food supplies from inspected and approved sources? YES / NO

2. What are the projected frequencies of deliveries for (ex: 2x/week):

Frozen foods _____ Refrigerated foods _____ Dry goods _____

3. Provide information on the amount of space (in cubic feet) allocated for:

Dry storage _____ Refrigerated Storage _____ Frozen storage _____

4. How will dry goods be stored off the floor?

5. Please list foods or categories of foods prepared more than 12 hours in advance of service.

6. Provide a HACCP plan for specialized processing methods such as vacuum packaged food, sous-vide, or cook-chill items prepared on-site or otherwise required by the regulatory authority.

Date Submitted: _____

7. Will the facility be serving food to a highly susceptible population? YES / NO

If yes, how will the temperature of foods be maintained while being transferred between the kitchen and service area? _____

8. Are containers constructed of food-grade materials to store bulk food products? YES / NO

Indicate type: _____

COLD STORAGE:

- 1. Does each refrigerator/freezer have a thermometer? YES / NO
- 2. Is there a bulk ice machine available? YES / NO

COOKING and HOT/COLD HOLDING:

- 1. What type of temperature measuring device will be used to ensure proper cooking temperatures?

- 2. How will hot foods be maintained at 135°F (60°C) or above during holding for service? Indicate the type and number of hot holding units.

- 3. How will cold PHF's be maintained at 41°F (5°C) or below during holding for service? Indicate the type and number of cold holding units.

- 4. How will reheating food to 165°F for hot holding be done rapidly and within 2 hours?

EXCLUSION:

- 1. Is there a written policy to exclude or restrict food workers who are sick or have infected cuts and lesions?
YES / NO

Please describe briefly: _____

- 2. Will employees have paid sick leave? YES / NO

INSECT AND RODENT CONTROL:

- 1. How will rodents, insects, and other pests be excluded from entry to the establishment?

- 2. Will air curtains be used?

YES / NO Where? _____

SANITATION:

1. How will cooking equipment, cutting boards, counter tops and other food contact surfaces which cannot be submerged in sinks or put through a dishwasher be sanitized?

2. Will all produce be washed on-site prior to use? YES / NO

Is there a planned location used for washing produce? YES / NO

Describe _____

If not, describe the procedure for cleaning and sanitizing multiple-use sinks between uses.

GARBAGE AND REFUSE:

Inside

1. Will refuse be stored inside overnight?

YES / NO Where? _____

2. Is there an area designated for garbage can or floor mat cleaning?

YES / NO Where? _____

3. Is there an area to store returnable damaged goods? YES / NO

Outside

4. Will a dumpster be used? YES / NO If yes, where is it located? _____

5. Will a compactor be used? YES / NO If yes, where is it located? _____

6. Will garbage cans be stored outside? YES / NO

7. Describe surface and location where dumpster/compactor/garbage cans are to be stored

8. Describe the location of the grease storage receptacle

9. Is there an area to store recycled containers? YES / NO

WATER SUPPLY:

1. Is the water supply public () or private ()
If private, has source been approved? YES / NO / PENDING
Please attach copy of written approval and/or permit.
2. Where are you filling the fresh (potable) water tank? _____
3. What is the capacity of the fresh (potable) water tank? _____
4. Is ice made on premises () or purchased commercially ()
If made on premise, are specifications for the ice machine provided? YES / NO
5. What is the capacity of the hot water generator?

6. Is the hot water generator sufficient for the needs of the establishment (take into account handwashing, dishwashing, cooking, and other employee usage)? YES / NO
7. Is there a water treatment device? YES / NO
If yes, how will the device be inspected & serviced?

SEWAGE DISPOSAL:

1. Where are you emptying your greywater tank at? _____
2. What is the capacity of the greywater tank? _____
3. Do you acknowledge that all sewage/wastewater disposal must be done in accordance with all state, federal, and local laws and regulations; Do you acknowledge that no sewage/wastewater may be disposed of down a storm drain or on the ground? YES / NO

GENERAL:

1. Are all containers of toxics, including sanitizing spray bottles, clearly labeled? YES / NO
2. Where will linens be washed? _____
3. Where will linens be dried? _____
4. Location of clean linen storage: _____
5. Location of dirty linen storage: _____
6. How will you clean the floor? _____

DISHWASHING FACILITIES:

- 1. Will sinks or a dishwasher be used for ware washing?
Dishwasher () 3-Compartment Sink ()
Hot Water Sanitizing () or Chemical Sanitizing ()
Is ventilation provided for hot water sanitizing? YES / NO
- 2. Are there drain boards on both ends of any pot sinks (deep sinks)? YES / NO
- 3. Are test papers and/or kits available for checking sanitizer concentration? YES / NO

HANDWASHING/TOILET FACILITIES:

- 1. Is there a handwashing sink in each food preparation and ware washing area? YES / NO
- 2. Do all handwashing sinks have a mixing valve or combination faucet? YES / NO
- 3. Is a handwashing sign posted at each handwashing sink? YES / NO
- 4. When at your various locations of vending, where will you use the restroom? _____

Please include a copy of your signed restroom agreement(s).

STATEMENT: I hereby certify that the information in Plan Review Part A & B is correct, and I fully understand that any deviation from the above without prior permission from this Health Regulatory Office may nullify final approval. I acknowledge that the information in Part A & B is not a comprehensive list of all food regulations and that it will be my responsibility to be familiar with and follow all applicable laws and rules.

Signature(s): _____

Owner(s) or Responsible Party

Date: _____

Approval of these plans and specifications by this Regulatory Authority does not indicate compliance with any other code, law, or regulation that may be required - federal, state, or local. It further does not constitute endorsement or acceptance of the completed establishment (structure or equipment). A preopening inspection of the establishment with equipment in place & operational will be necessary to determine if it complies with the local and state laws governing food service establishments.



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FOOD SERVICE PERMIT APPLICATION

Please Print

Date ___/___/___

Transaction Type: [] New/ Remodeled Facility [] Renewal [] Transfer of Ownership
Seating Capacity: _____

Facility Information:

(Required for food trucks)

Food Truck License Plate: _____

Establishment Name: _____

Address: _____
Street City State ZIP code

Email (Required): _____

Phone (____)____-____ Alt. Phone (____)____-____ Fax (____)____-____

Mailing Address: (If different from above) In Care Of: _____

Position: _____ Phone (____)____-____ Fax (____)____-____

Address: _____
Street City State ZIP code

Certified Food Safety Manager(s): _____
Please attach a copy of certificate(s).

Owner Information:

Primary Owner: _____ DBA: _____

Address: _____
Street City State ZIP code

Email (Required): _____

Phone (____)____-____ Alt. Phone (____)____-____ Fax (____)____-____

Ownership Type: [] Sole Owner [] Partnership [] Corporation [] Other _____

Billing Information:

Send Bill To: [] Owner [] Facility [] Third Party (If third party, fill out information below)

Send Permit To: [] Owner [] Facility [] Third Party (If third party, fill out information below)

Address: _____
Street City State ZIP code

Phone (____)____-____ Alt. Phone (____)____-____ Fax (____)____-____

Signature of Applicant: _____

For Office Use Only
Food Permit Fee \$ _____ Received by: _____ Date: ___/___/___
Permit Issued Date: ___/___/___ Est. Number: _____ Risk: _____