



COCHISE COUNTY ENVIRONMENTAL HEALTH Mobile Food Establishment Plan Review

Please answer the following questions completely and turn in along with **Cochise County EH Permit Application-MFU** and make sure to fill out **Commissary Information**:

Name of Business _____

Name of Manager/Contact Person _____

Date questionnaire was completed _____

List of locations/events/farmer's markets you plan to operate at: _____

FOODS

Check categories of Time/Temperature Control for Safety Foods (TCSs) to be handled, prepared and served.

- Thin meats (poultry, fish, eggs, hamburger, sliced meats, fillets)
- Thick meats (whole poultry, roast beef, chickens, hams)
- Cold processed foods (salads, sandwiches, vegetables)
- Hot processed foods (soups, stews, chowders, casseroles)
- Bakery goods (pies, custards, creams)

Other (please list): _____

FOOD SUPPLIES

1. Are all food supplies from inspected and approved sources? Yes No

Where will the food supplies be obtained from? _____

2. What is the procedure for receiving food shipments? Are temperatures checked and containers inspected for damage?

3. What happens to food shipments that are found unsatisfactory?

4. Where will food be stored between events?

COLD STORAGE

1. Is adequate and approved freezer and refrigeration available to store frozen foods at 0°F or below and refrigerated foods at 41°F or below? Yes No

2. Will raw meats, poultry and seafood be stored in the same refrigerators and freezers with cooked/ready-to-eat foods? Yes No

If yes, how will cross-contamination be prevented?

3. When storing raw meats in the same unit, in what order (vertically) will the meats be stored?

4. Does each refrigeration unit have a thermometer? Yes No

Number of refrigeration units: _____

Number of freezer units: _____

5. Are light shields or shatter resistant bulbs provided in each refrigeration/freezer unit? Yes No

COOKING

1. What type of food probe thermometers (0° - 212°F) will be used to measure final cooking/reheating temperatures of TCSs? _____

2. Describe your method of calibrating food probe thermometers:

HOT/COLD HOLDING

1. How will hot TCSs be maintained at 135°F and above during holding for service? Indicate type and number of hot holding units:

2. How will cold TCSs be maintained at 41°F and below during holding for service? Indicate type and number of cold holding units.

PREPARATION

1. Please list categories of food prepared more than 12 hours in advance of service and where preparation will take place. _____

2. Will disposable gloves, utensils or food grade paper be used to minimize handling of ready-to-eat foods? Yes No

3. Will sanitizer spray bottles or buckets be used? Yes No Both

4. Will employees be instructed to wear aprons and hair restraints? Yes No

5. Is there an established policy to exclude or restrict food workers who are sick or may have infected cuts or lesions? Yes No

Please describe briefly: _____

6. Describe the procedure used for minimizing the amount of time TCSs will be kept in the temperature danger zone (41°F-135°F) during preparation and travel.

INSECT AND RODENT HARBORAGE

1. Are screen doors provided on all entrances left open to the outside? Yes No

2. Do all operable windows have a minimum #16 mesh screening? Yes No

WATER SUPPLY

1. Is water supply public or private ?

2. If private, has the source been approved/tested? Yes No Pending

3. Is ice made on premise or purchased commercially ?

POWER SUPPLY

How will power/electricity be provided to the vehicle to run equipment including hot water heater, refrigerators, freezers, cooking and hot holding equipment?

While at event or vending location? _____

During travel to event or location? _____

(If cold and hot holding equipment will not be operational during transit food temperatures must be maintained by another means. For example, in an insulated cooler with ice for cold foods.)

It is a requirement that equipment be kept running at all times during an event or on location to ensure running of hot water, temperature control, etc. Have you made arrangements for keeping generators or vehicles running, or electricity connected at all times? _____

PLUMBING SCHEDULE & SEWAGE DISPOSAL

Write "n/a" if not applicable

1. What is your tank capacity for fresh water (gallons)? _____
2. Inner diameter of fresh-water inlet (inches) _____
3. What is your tank capacity for wastewater (gallons)? _____

(Must be 15% greater than fresh water)

4. Inner diameter of wastewater outlet (inches) _____
5. What is your water heater tank size (gallons)? _____
6. Flow rate at sinks (gallons/minute)? _____
7. Where are you disposing of your wastewater? _____

DRY STORAGE

1. Is there adequate storage space for all menu items and meals served on the vehicle?

Yes No If NO, then where will it be stored? _____

2. Are dry goods stored 6 inches off the floor of the vehicle? Yes No

SINKS

1. Is a 3-compartment sink provided on vehicle? Yes No

Size of 3-compartment sink basin(s) (LxWxD) _____

2. What type of sanitizer is used?

Chlorine 50-100 ppm

Iodine 12.5 ppm

Quaternary Ammonium 200 ppm

3. Are test papers and/or kits available for checking sanitizer concentration? Yes No

4. Is a separate hand sink provided on vehicle? Yes No

(All hand sinks must be provided with soap and disposable towels.)

Size of hand-sink basin (LxWxD) _____

5. Is hot and cold running water under pressure available at each hand washing sink? Yes No

GENERAL

1. Are all containers of toxics including sanitizing spray bottles clearly labeled? Yes No

2. Are food grade containers/bags being used to store bulk food products? Yes No

Are containers labeled with the contents? Yes No

3. Indicate all areas where exhaust hoods are installed: _____

4. How is equipment and food secured in the vehicle during transportation?

5. Where will vehicle and equipment cleaning take place?

As the owner of the aforementioned mobile food unit, I agree to follow the above terms of operation for servicing my unit. Deviating from these terms will result in the termination of my mobile food permit and the issuance of civil penalties.

Owner/Manager

Date

MFU CHECKLIST(S):

Checklist for no new construction

(New owner of permitted establishment or those with current permit issued in another Arizona county)

- Complete Application (please indicate n/a, if not applicable rather than leaving empty boxes on the application)
- Application fees (see below)
- Proposed Menu(s) with consumer advisory (if applicable)
- Commissary Agreement
- Toilet Use Agreement (if applicable)
- Route Sheet/Location of operation
- Photos of interior and exterior of unit
- Copy of current permit card in other Arizona county, if permitted under state licensing requirements, if applicable
- Copy of Food Processor/Production permit or equivalent, if applicable

Checklist for construction/review

- Complete Application (please indicate n/a, if not applicable rather than leaving empty boxes on the application)
- Plan Review fees (see below)
- Proposed menu(s) with consumer advisory (if applicable)
- Commissary Agreement (must be submitted prior to permit issuance)
- Complete set of plans
- Plumbing and Finish schedule (if not already indicated in the plan)
- Cut sheets/schematics of all equipment to be installed. This includes any custom-built equipment. *
- Toilet Use Agreement (if applicable, must be provided prior to permit issuance)
- Route Sheet/Location(s) of operation (must be provided prior to permit issuance)
- Photos of interior and exterior of unit
- Copy of Food Processor/Production permit or equivalent, if applicable

Checklist for submitting plans/layout

- Plans are full size, printed to scale as indicated on plan/drawing, and legible.



- Plans include top view and side view(s) of unit/booth layout
- Plans are a minimum of 8.5"x11".
- Plans contain all lighting, ventilation, plumbing layout, and locations of sinks and equipment.