



Public Health
Prevent. Promote. Protect.
Ashtabula City Health Department

4717 Main Avenue
Ashtabula, Ohio 44004

Vital Statistics: (440) 992-7123
Nursing Department: (440) 992-7122
Environmental Department: (440) 992-7121
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Mobile Food Service Operation & Mobile Food Establishment Guidelines and Application

A mobile food service operation is an operation that is operated from a movable vehicle, portable structure, or watercraft; routinely changes location; and it does not remain at any one location for more than forty consecutive days. The operator of a mobile food service shall make application for a license to the board of health of the district in which the operator's business headquarters are located. The application must be submitted prior to commencing operation in a new licensing year. Plans must be submitted showing a list of equipment (make and model number), surface finishes, lighting and location of major equipment as well as menu.

This guide is designed to assist you with the layout of the facility, the equipment you will need and the food preparation processes required to be able to serve a safe food product to your customers.

Mobile Review Process

Once plans are submitted, and meet all requirements then inspection of the mobile can be scheduled with the City of Ashtabula Health Department. Plans may require additional information or changes – in this case, you will be contacted.

Inspections

Before a mobile food license can be issued the unit needs to be inspected. All equipment must be operational at the time of inspection. Arrange for this inspection after submission of your application and layout. Though we will attempt to accommodate your schedule, call early to avoid scheduling conflicts and allow time for re-inspections if necessary. Call 440-992-7121 for schedule.

Once the appropriate license fee is paid and the opening inspection is completed by Ashtabula City Health Dept you will be able to open for business.

Recommended Food Safety Training for Mobile Operators

The Ashtabula City Health Department recommends all new facilities have at least one "person in charge" per shift who has received Level One (Basic Food Safety Training) or Level Two (ServSafe Food Protection Manager) training. This must be accomplished prior to receiving your food license; if this is not possible due to scheduling conflicts an additional 30 days may be granted. This requirement is for new businesses as well as new owners of existing businesses. Copies of current certificates must be maintained at the facility and provided to the sanitarian upon request. Applications are available for training in both PERSON IN CHARGE and ServSafe, contact the Health Department to obtain an application.

What is required in my facility?

Every business is unique. What will be required will be based on your menu. So, you must make sure that you have the space and equipment needed to store, prepare and serve those foods safely. Please be advised this is a summary of the basic information required for the facility review and is not inclusive of all the requirements for the operation. Foods served from the Mobile unit must be **PREPARED** in the Mobile. No food preparation is allowed from a residential home location.

In general, you will be required to have the following...

1. **Hand washing sink and three-compartment sink** with a complete plumbing system that includes: hot water tank, potable water tank and waste water storage tank. Food grade hose if connecting to a water source. The water supply must be protected from back siphonage with an ASSE 1012 or ASSE 1024 backflow prevention device installed on the water supply. Sinks must be large enough to handle your largest piece of equipment to wash, rinse and sanitize it.
2. **Mechanical refrigeration** units to handle storage of all food items.
3. **Storage Areas** – all storage shelves in coolers, freezers, dry food storage and utensil storage areas must be constructed of an approved material
 - **NO BARE** wooden shelving is permitted.
 - All food items, clean utensils, tableware and food contact equipment must be stored at least six (6) inches off the floor at all times.
4. **Lighting** – all lighting above food preparation, storage, service, display areas and equipment storage must be shielded.
5. **Smooth & cleanable surfaces** for floors, walls & ceilings in food prep & storage areas.
 - Floor and wall materials shall be impervious to water.
 - Floor and wall joints must be coved throughout facility.
 - Carpeting is prohibited in food preparation and washing areas.

Based on menu and equipment, many facilities will also need ...

1. **Food/vegetable sink** (air gapped) for processing produce or other foods.
2. **Ventilation hoods** for cooking equipment, grills, fryers, etc. (optional).
3. **Fire extinguisher** (check with your local fire department on type).
4. An approved **sanitizer** and appropriate test kit to check concentrations of your solution.
5. A **metal-stemmed thermometer** for food temperatures and refrigeration thermometers inside all cold holding units.

Mobile Identification – Identification is required on the exterior of the mobile. The lettering must be at least 3" tall and 1" wide and contain the following: company name, city of origin and phone number.

Facility Review Application Mobile Food Service

Contact Information

| | | |
|--|----------------|--|
| Operation | Name | |
| | Address | |
| | Phone | |
| Owner | Name | |
| | Address | |
| | Phone | |
| Contact Info (if different from owner) | Name | |
| | Address | |
| | Phone | |
| Check one: Mobile () Self-Sufficient Mobile () Push-Cart () Knockdown Mobile () | | |
| Mobile License Plate Number: | | |
| Describe Food Handling Activities: | | |
| | | |
| Cold Holding Practices: | | |
| | | |
| Hot Holding Practices: | | |
| | | |

Facility Review Checklist:

The Ashtabula City Health Department requires the following information be included in the Facility Review Application. Please contact the health department for any additional information as necessary.

Please indicate with a checkmark that the following are included in your plan review:

- Facility Review Application – contact information.
- Facility floor plan, drawn legibly and reasonable to scale to include location of entrances and exits. Any modifications from these plans before opening must be reviewed and accepted by the sanitarian.
- Lighting plan.
- Equipment list with equipment manufacturers, model numbers and specification sheets (if available), all equipment must be NSF approved and commercial quality for use in a licensed facility.
- A full menu including seasonal, special order items.
- Surface finishes – materials for floors and coving, walls and ceilings.
- Backflow preventer.

EQUIPMENT DATA SHEET

| | |
|------------------|--|
| Name of Facility | |
| Address | |
| Operator/Owner | |
| Phone Number | |

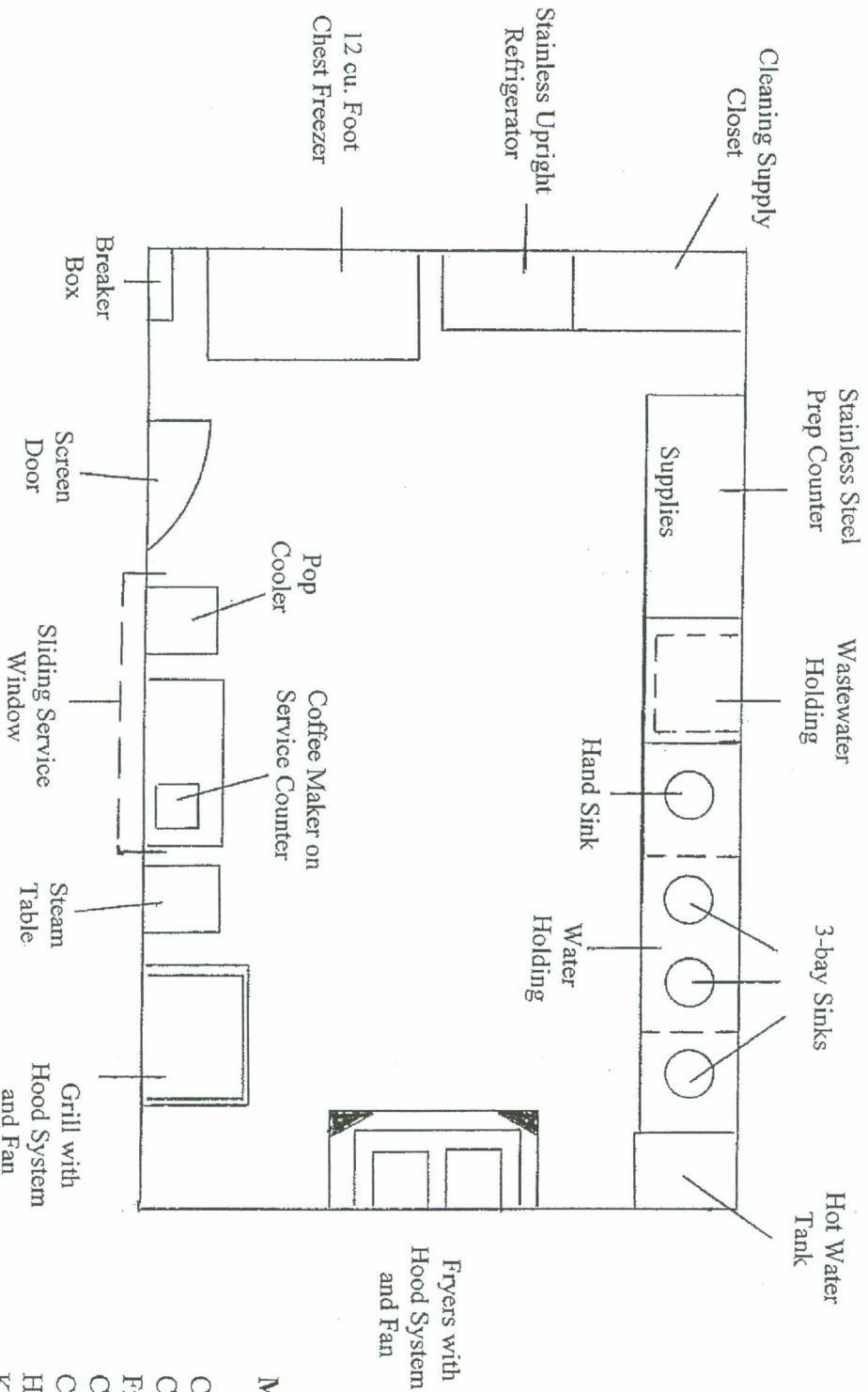
All new, used and existing equipment must be commercial type, NSF approved or approved by another recognized testing facility.

This equipment data sheet must be submitted with the detailed plans or as soon as possible before construction begins. If more space is needed for equipment list or other information, use additional paper.

| Item/equipment | Manufacturer | Model# | Serial# |
|----------------|--------------|--------|---------|
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EXAMPLE OF FLOOR PLAN FOR A MOBILE FOOD SERVICE OPERATION

ABC CONCESSIONS



MENU:

- Coffee
- Canned Pop
- Fried Mushrooms
- Cheese Stix
- Curly Fries
- Hot Dogs
- Kielbasa & Sauerkraut
- Cheese Steaks

Application for a License to Conduct a: (check only one) Food Service Operation
 Retail Food Establishment

Instructions:

1. Complete the applicable section. (Make any corrections if necessary.)
2. Sign and date the application.
3. Make a check or money order payable to:
4. Return check and signed application **by*:**

Ashtabula City Health Department
4717 Main Avenue
Ashtabula, OH 44004
(440) 992-7123

to:

*There is a mandatory penalty fee of 25% of the renewal fee for operating a food service operation or retail food establishment after the deadline (Chapter 3717 of the Ohio Revised Code).

Before license application can be processed the application must be completed and the indicated fee submitted. Failure to complete this application and remit the proper fee will result in not issuing/renewing a license. This action is governed by Ohio Revised Code 3717.

| | | | |
|---|------------------|--|-----|
| Name of Facility | | Name of License Holder | |
| Address | | E-mail | |
| City | | State | ZIP |
| Phone # () | Fax # () | Check if applicable <input type="checkbox"/> Catering <input type="checkbox"/> Seasonal | |
| Name of individual certified in food protection (if any) and their certificate number (use back for additional names) | | | |

Mailing address for annual renewal if different than above:

| | | | |
|---|--|--------------------|-----|
| Name of parent company or owner | | Phone # () | |
| Address | | E-mail | |
| City | | State | ZIP |
| <i>I hereby certify that I am the license holder, or the authorized representative, of the food service operation or retail food establishment indicated above:</i> | | | |
| Signature | | Date | |

Licenser to complete below

| | | | |
|-------------|------------|----------------|--------------------|
| Category | | | |
| License fee | + Late fee | + State amount | = Total amount due |

Application approved for license and certified as required by Chapter 3717 of the Ohio Revised Code.

| | | | |
|----|------|-----------|-------------|
| By | Date | Audit no. | License no. |
|----|------|-----------|-------------|