

Chesprocott Health District Itinerant Vendor Guide



www.Chesprocott.org

4/2022;

Chesprocott Health District is an equal opportunity employer

Application Steps to get an Itinerant Vendor License

1. Read this packet from front to back.
2. Fill out and submit the plan review application located on pg 6-10.
3. Submit the following with your application:
 - Floor Plan
 - Provide specifications sheets of equipment
 - Proposed Menu
 - Consumer Advisory Notice needed?
 - Certified Food Protection Manager Certificate (Class 3 & Class 4)
 - For Well water – DPH compliance document or current water test
 - Plan review fee
 - If approved....
2. Submit Itinerant Vendor License Application
 - Schedule a CHD Sanitarian inspection of operation

Guidance Document

Introduction: This document is to assist those mobile food vendors in getting your mobile food operation licensed in accordance to State Department of Public Health Code and Chesprocott Local Food Ordinance.

Public Health Code §§ 19-13-B48 Itinerant Food Vendor Regulation are located on our website. www.chesprocott.org.

To qualify for a license as a mobile/itinerant food vendor the following criteria must be met:

1. The food service unit must be mounted on wheels or other method of movable design.
2. The unit shall be self-contained; gas, water and sewage holding tanks must be attached to the vehicle.
3. The food service unit shall remain movable unless approved by the Health Director for a short-term duration in which the operator must demonstrate how water and sewage will be maintained, stored and disposed of.

Pre-operational Inspection: Upon receiving an approved plan review from a CHD Sanitarian, a pre-inspection at Chesprocott's office shall occur prior to issuance of a license.

Exhaust System: Any food unit equipped with open cooking facilities such as a grill, fryer, stove ect must be provided with a forced air exhaust system which must:

1. Extend 8-10 inches beyond edge of cooking surface.
2. Equipped with removable filter screens
3. Is protected from entrance of insects and rodents

Holding Tanks: Running water must be provided with a water tight waste holding tank which has a capacity equal to 1 ½ times the volume of the potable water storage facility. Waste water must be disposed in a manner approved by CHD. The potable water tank must be a closed water tight system with a connected water fill hose portal.

Unit Signage: Must bear the name and address of the licensee legibly on the side of the unit. If more than one unit is in the fleet, a unit number must be noted. A current food service license from CHD must be affixed to the unit in a visible location.

Food from an Approved Source: All food and beverage offered for sale must be from an approved source. Prepared food products must be obtained from a licensed facility. A copy of the license must be presented in your plan review process. Home preparation of potentially hazardous food products is prohibited.

Refuse Storage: Must provide a waste receptacle for disposal of refuse outside the vehicle.

Refrigeration and Hot Holding Units:

1. Refrigeration units (gas or electric) must be capable of maintaining potentially hazardous foods at a temperature of 41° F or less. All refrigeration units must be equipped with a thermometer.
2. Hot holding units must be capable of maintaining potentially hazardous foods at a temperature of 135° F or higher. Proper length thermometer(s) for checking temperatures must be available. Hot holding units shall not be used to bring cold foods to service temperatures unless designed for that purpose.

Handwashing Facilities: All food service units must be provided with handwashing facilities. Class 1 operations may use an alternate method of cleaning hands. All other classifications must be equipped with a hand washing sink with hot and cold running water.

Water Supply: Water used on food service units must be obtained from:

1. A municipal or public water source regulated by DPH Water Supply Section.
2. A private well supply that has been tested and approved by DPH WSS.

Unit Design: All food service units must be designed so as to protect food product from air borne contamination during periods of display and service. Food contact surfaces should be constructed of commercial grade durable non-porous material which is smooth and easily cleanable. Units equipped with

Chesprocott Health District

open cooking facilities or where operations involve potentially hazardous food preparation must be completely enclosed; customer service window(s) must be equipped with screens.

Sanitizing Equipment: When food service operations involve the handling and/or preparation of potentially hazardous food products, the service unit must be equipped with a three bay sink with hot and cold running water. The sinks must be of sufficient size to submerge the largest preparation utensil. CHD may allow a 2 bay sink if limited food preparation activities are minimal.

Classifications:

CLASS 1 - Commercially prepackaged foods and/or hot or cold beverages only

CLASS 2 - Cold ready to eat commercially processed food and/or hot/cold beverages

CLASS 3**- Preparation of hot foods which are consumed within 4 hours

CLASS 4**- Preparation of hot foods which are held more than 4 hours

**** Needs a Certified Food Protection Manager Certificate to operate**

Consumer Advisory Notice: If you are offering menu items that are served raw (e.g. sushi, sashimi, clams or oysters on the half shell, carpaccio or raw egg in a Caesar salad) you must post the following statement on your menu:

“Consuming raw or undercooked meats, poultry, seafood, shellfish or eggs may increase your risk of foodborne illness”

PLUS in addition to the above statement, you must also put an asterisk (*) or other icon next to each menu item that is offered undercooked or raw, with the above statement.

Plan Review Application for Itinerant Food Vendor Service

- Operational Change Change of ownership New Business

Food service business name: _____

Name of owner(s) of business: _____

Mailing address: _____ Town: _____ Zip: _____

Owners cell number: _____ Owners E-mail: _____

Do you have a Base Operation? Yes NO

If yes: Name and Address _____

Type of Vendor: Towed/push cart Self-contained mobile kitchen (truck)

Water Source: Public Water Well Water – must be in compliance with DPH Water Supply Section

Grease Disposal: N/A How and where disposed: _____

Classification: 1 2 3** 4**

** Include copy of Certified Food Protection Manager Certificate

Method of Cooking (check all that apply):

- | | | | |
|-----------------------------------|-------------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Steaming | <input type="checkbox"/> Blanching | <input type="checkbox"/> Roasting | <input type="checkbox"/> Broiling |
| <input type="checkbox"/> Smoking | <input type="checkbox"/> Stewing | <input type="checkbox"/> Barbeque | <input type="checkbox"/> Grilling |
| <input type="checkbox"/> Boiling | <input type="checkbox"/> Sauteing | <input type="checkbox"/> Baking | <input type="checkbox"/> Deep Frying |
| <input type="checkbox"/> Brazing | <input type="checkbox"/> Pan Frying | <input type="checkbox"/> Other _____ | |

Menu Foods (check all that apply):

- Fruit** Commercially packaged and prewashed
 Washed and processed on site

- Vegetables** Commercially packaged and prewashed
 Washed and processed on site

- Meat** Raw Commercially packaged & pre-cooked Prepare & cook on site

- Fish** Raw Commercially packaged & pre-cooked Prepare & cook on site

- Chicken** Raw Commercially packaged & pre-cooked Prepare & cook on site

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- Pork** Raw Commercially packaged & pre-cooked Prepare & cook on site
Eggs Raw Commercially packaged & pre-cooked Prepare & cook on site

Describe how you will process food on your mobile vendor unit (on-site):

Check all that apply: Cut Chop Mix

Food Purchased: Where do you purchase your food from?

Provide a detailed description of how foods sold on the mobile unit are prepared:

COLD FOODS

PREPARATION STEPS

HOT FOODS

PREPARATION STEPS

List the food that will be made more than 4 hours in advance:

There shall be no home cooking, no home preparation, and/or no home storage of food offered on mobile vendor units.

List of foods that are leftover at the end of the business day:

How and where will you store the leftover food?:

Where will you store extra paper goods and extra food?

How will you reheat leftover food?

Equipment (check boxes that apply for all equipment installed on the mobile unit)

- Grill
- Coffee maker
- Steamer
- Hot Holding Unit
- Soup warmer
- Sandwich making unit (cold food)
- Deep Fryer
- Oven
- Undercounter Refrigeration
- Microwave
- Freezer
- Thermal Box
- Hand wash sink
- Food Prep Sink
- 3 compartment sink

Chemicals (name of sanitizing chemical you will be using in the mobile unit)

- Chlorine
- Quaternary Ammonium
- Iodine

Water Tank:

How often is the water tank cleaned? _____ How do you clean it? _____

***You may not discard your wastewater into a storm drain or onto a street or onto a driveway.

How do you dispose of the waste water?

Garbage: Provide the size and type of commercial garbage cans you will have for your unit.

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Where and how will you dispose of your garbage on the mobile vending unit?

List any proposed locations you may offer your services to?

1. _____
2. _____
3. _____
4. _____
5. _____

The following documents must be submitted for review:

- Proposed Menu
- Detailed plan of the mobile unit drawn to scale showing location of equipment
- you may also include photos
- Proposed Equipment Specifications
- Copy of current food license if preparing off-site
- If your business has more than one unit or cart, each one must go through this process and be licensed if they operate in our jurisdiction.

Once this has been submitted and approved, you will need to fill out an Itinerant Vendor License and schedule a Sanitarian to inspect your unit.

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The undersigned agrees to comply with all regulations and ordinances enforced by the Chesprocott Health District. You must contact Chesprocott at 203-272-2761 if you propose further changes in menu, equipment, facility, or any of the above referenced information.

Please contact the Police Department and Zoning Department of each town you plan to operate in for their approval.

Owners Signature

Date

Owners Name Printed

******for office use only******

CHD Approved _____ or Denied _____ Date: _____

Fee Paid: _____ Class _____ License Period _____

Sanitarian Reviewed by: _____

Comments: _____