

Application Date: _____ Date of Planned Opening: _____

MOBILE UNIT PLAN REVIEW FORM													
	ESTABLISHMENT INFORMATION												
Name of	Name of Mobile Unit:						Phone:						
Type of L	Type of Unit: ☐ Mobile (Trailer/Food Catering Truck) ☐ Push Cart ☐ Self-Contained Unit ☐ Prepackaged Only²												
Street Ad	ldress:								Cell:				
City:									Fax:				
State/Zip):					Email:							
County:													
Website/	Facebo	ook Page:											
				0	WNERSHIP I	NFORMA	TION						
Individua	I(s) or	Corporate	Name:						Phone	e:			
Mailing A	ddress	:							Cell:				
City:									Fax:				
State/Zip):					Email:			1				
		CO	NTACT I	NFORM	MATION (\square	CHECK	IF SA	ME AS	ABOVI	E)			
Name of	Primar	y Contact:							Phone	e:			
Street Ad	ldress:								Cell:				
City:									Fax:				
State/Zip):					Email:							
					LICENSING II								
Has your	mobile	e unit been	previous	ly lice	nsed in Colo	rado? YI	ES / N	Ю					
If yes, pr	ovide t	the followir	ng inform	ation	Year:	Cou	unty I	icense	issued	in:			
Sales Tax	Accou	ınt Number	:										
				DAYS	AND HOUR	S OF OPE	RATI	ON					
Days		Sunday	Monda	ıy	Tuesday	Wednes	sday	Thur	sday	Frida	у	Sat	urday
Hours													
			CIRC	LE ALI	_ MONTHS Y	OU PLAN	I TO	OPERA	TE				
Jan	Feb	Mar	Apr	May	Jun	Jul	Au	g	Sept	Oct	No	V	Dec
PROJ	IECTE	DAILY MA	XIMUM N	IUMBE	R OF MEALS	TO BE S	ERVE	D PER	SHIFT	, WHERE	APP	LICAI	BLE
Breakt	fast				₋unch				Dini	ner			
What is t	What is the maximum number of staff working during hours of operation?												

¹- Self-Contained Mobile Unit:, See definition and additional requirements in Annex page 4.

²- **Prepackaged Only:** For operations that offer prepackaged foods only, please complete page 1, provide a menu, and contact your Local Public Health Agency.

Below is a checklist of required information needed to complete the plan review. Please ensure all information is included. **Lack of complete information will delay review and plan approval.**					
Menu	Table 5: Hot Holding Unit				
Table 1: Food Handling Procedures	Table 6: Manual Warewashing				
Floor Plan/Equipment Layout	Table 7: Water Heater				
Table 2: Finish Schedule	Water Supply Information				
Table 3: Ventilation	Wastewater Tank/Disposal Information				
Equipment Specifications Commissary Agreement					
Table 4: Refrigeration and Freezer Capacity					

I. MENU AND FOOD HANDLING PROCEDURES

- A. Submit a complete menu.
- B. Check all the food handling procedures that apply and indicate the location where they will take place in *Table 1* below.

TABLE 1 FOOD HANDLING PROCEDURES						
Procedure	Υ	N	If yes, indicate where procedure will to place			
			Commissary	Mobile		
Will produce be washed?						
Will frozen foods be thawed?						
Will foods be prepared in advance? (e.g. sliced, chopped, etc.)						
Will food be cooked?						
Will food be rapidly cooled?						
Will food be rapidly reheated?						
Will food be held hot?						
Will food be held cold?						

^{**} Food shall be obtained from approved sources that comply with the applicable laws relating to food and food labeling**
Preparation of food or storage of any items related to the operation is prohibited in a personal home.

1.	How will bare hand contact with ready-to-eat foods be prevented during preparation? Check all that apply.
	□ Utensils
	□ Gloves
	□ Deli Tissue
	□ Other:

II. FLOOR PLAN/EQUIPMENT LAYOUT:

plu all co	A. Submit a floor plan drawn to scale that includes the location and identification of all equipment, plumbing fixtures and storage areas, including but not limited to the items listed below. Check all that apply to the mobile unit. <i>NOTE:</i> All equipment related to the operation must be of commercial design that is certified or classified for sanitation by an American National Standards Institute (ANSI) certification program or a design that is approved by the Department.						
	□ Handsinks			Ventilation			
	•	ration Sinks					
	Warewashi	ng Sinks					
	☐ Mop Sink						
	☐ Storage Are			3 1			
	□ Refrigerati				ing Equipment		
	☐ Hot Holdin	g Units		Spare Tires, T	ools, Hoses, etc.		
	SICAL FACILIT		n <i>Table 2</i> below	to indicate inter	ior finishes for t	ne mobile unit.	
TABLE 2			FINISH SCHED	ULE			
	Floors		Wa	Walls Ceiling			
Material	Material Finish Type of		Material	Finish	Material	Finish	
	FINISH	Base	Matchiai	1 1111311			
Stainless Exam	Smooth	Base Rubber Cove	FDD	Smooth	Stainless	mple Smooth	
Stainless	Smooth		FDD		Stainless	mple Smooth	
Stainless	Smooth		FDD		Stainless	mple Smooth	
Stainless Exam	ple Smooth	Rubber Cove	FRP Exa	Smooth ample	Stainless	mple	
Stainless Exam B. Wi	ple Smooth	Rubber Cove ors: To prever	FRP Exa	Smooth ample	Stainless Exa	mple	
Stainless Exam B. Wi	ndows and Do	Rubber Cove ors: To prever nd doors scree	FRP Example 1 Example 2 Ex	Smooth ample ests, outer oper	Stainless Exa	mple	

- C. Ventilation: If the mobile unit is enclosed and grease-cooking is conducted, such as cooking meats on a stove top or deep frying, a Type 1 hood is required.
 - 1. If applicable, provide specification sheets for the exhaust hood and fan, and provide the hood information in *Table 3* below. Provide the size in feet (*length x width*) of hood. Include manufacturer's recommended exhaust listings in cubic feet per minute (CFM)s.

TABLE 3	VENTILATION	
Hood Type (Type 1 or Type 2)	Dimensions (feet) of Hood (length x width)	Exhaust Flow (CFM)

IV. EQUIPMENT SPECIFICATIONS:

- A. Submit equipment specification sheets, including make and model numbers. All equipment must be of commercial design, certified by an ANSI accredited certification program, or a design approved by the department. If the specification sheet lists more than one piece of equipment, identify the specific equipment to be used.
- B. Provide information on refrigeration/freezer capacities and hot holding units by completing *Table 4* and *Table 5* below.

TABLE 4	REFRIGERATION / FREEZER CAPAC	CITY
TYPE OF UNIT	# OF UNITS PROVIDED	TOTAL CUBIC FEET
Reach-in Cooler (under counter)		
Reach-in Cooler (stand up)		
Open Top Sandwich Cooler		
Reach-in Freezer (under counter)		
Reach-in Freezer (stand up)		
Other cold holding storage:		

TABLE 5 HOT HO	OLDING UNITS
TYPE OF UNIT	# OF UNITS PROVIDED
Steam Tables	
Hot Box	
Cook & Hold Units	
Other hot holding storage:	

V.	UTENSILS	AND	WAREWA	SHING

VI.

A.	 A. Where will utensil washing take place? (Check all that apply) Commissary 3-compartment sink Commissary mechanical dishwasher Mobile unit 3-compartment sink 						
В.		ent washing will to ink in <i>Table 6</i> belo		he mobile uni	t, provid	e specifications for the	
TABLE	6	ı	MANUAL WAR	EWASHING			
LENGT	H (inches) OF SOIL		NSIONS OF (in	LENG	ENGTH (inches) OF CLEAN DRAINBOARD		
	DRAINBOARD	LENGTH	LENGTH WIDTH DEPTH				
Sink	compartments must	t be large enough to	o accommodat	e the largest p	iece of e	quipment or utensil used.	
VI.	WATER SYSTEMS	:					
A.	A. Please provide plumbing diagrams or schematics showing location of water heater, plumbing fixtures, water supply and wastewater tanks, drain lines and water inlets/outlets on the floor plan.						
В.	Hot Water						
	 How will hot v □ Water Hea 	·	to plumbing f	ixtures on the	unit? (Cl	neck all that apply)	
	Passive System / Heat Exchanger (eg. water is heated as it passes by the heating elementOther (specify):						
	2. If a water hea	iter is installed, co	omplete <i>Table</i>	7 below.			
TABLE 7	7	V	VATER HEATER	₹			
	Make	Model #		KW/BTU Ratio	ng	Tank Capacity	
			I		I		

C.	Wa	ater Supply Information									
	1.	Provide location where water will be obtained	below.								
		Business Name Street Address	City	State/Zip							
	2. Provide water supply tank capacity (in gallons) below.										
	3.	Provide the maximum number of hours operating between filling water supply tank below.									
	4.	What plumbing fixtures will be present on the mobile unit? (Check all that apply) 3-compartment sink (Indicate number of sinks): Handsink (Indicate number of sinks): Food preparation sink (Specify dimensions in inches LxWxD):									
		□ Food preparation sink (Specify dimensions in inches LxWxD):□ Pre-rinse sprayer									
		□ Utensil soak sink									
		□ Mop sink									
		☐ Dishmachine									
D.		astewater Tank/Disposal Information									
	1.	Provide location where wastewater will be disposed of below.									
		Business Name Street Address	City	State/Zip							
	2.	Provide wastewater tank capacity (in gallons) below.									
	NO	NOTE: The wastewater tank must be at least 15% larger than water supply tank.									
	3.	Prevention of Cross-Contamination to Water Supply: How will you ensure there is no cross-contamination between the drinking water and waste water tanks and hoses? (Check all that apply)									
		□ Drinking water inlet above waste outlet									
		□ Different colored or sized hoses	□ Different colored or sized hoses								
		□ Different colored or sized removable tanks									
		□ Different threads on inlet and outlet									
		□ Other (specify):									

COMMISSARY AGREEMENT Date (Commissary Owner/Operator) (Commissary Establishment Name) located at ______(Address of Establishment, City, State, Zip) give my permission to ______ of _____ of _____ (Mobile Unit Owner/Operator) (Name of Mobile unit) to use my kitchen facilities to perform the following tasks on their operational days: ☐ Preparation of food such as produce, cutting meats/seafood, cooking, cooling, reheating □ Warewashing ☐ Filling water tanks □ Dumping waste water ☐ Storage of foods, single service items, and cleaning agents ☐ Service and cleaning of equipment □ Other (specify) _____ A Commissary Use Log will be maintained and made available to the department upon request. Indicate how and where the commissary use log will be maintained: Commissary Water Supply: □ Public □ Private □ Public Water System ID Number (PWSID#) _____ Commissary Sanitary Sewer Service: □ Public □ Private _____ Date _____ Signature _____ (Commissary Owner/Operator) Commissary Contact phone number: ______ Commissary Email address: _____

This Commissary Agreement is valid for this calendar year only

Annex: Mobile Unit General Requirements

NOTE: The following list of requirements has been provided to assist with frequently asked questions specific to mobile unit plan reviews. The list does not represent the entirety of the requirements. Mobile retail food establishments must comply with all the requirements provided in Chapter 9 of the *Colorado Retail Food Establishment Rules and Regulations*.

I. HANDWASHING SINKS

- A. Handwashing sinks must be capable of providing a hands-free, continuous flow of 100°F water delivered under pressure.
- B. Handwashing sinks must be easily accessible at all times and used for no other purpose.

II. VENTILATION

- A. If the mobile unit is enclosed (floors, hard sided walls, ceiling) and grease-cooking is conducted (i.e. cooking meats on a stove top or deep frying), then a Type 1 hood is required.
- B. A single smoker, grill, or oven may be used outside the unit, provided that all foods are prepared, assembled, and served from within the mobile unit and not from the external piece of cooking equipment.

III. WATER SUPPLY

- A. Water must be obtained from an approved source, as described in Section 5-101 of the *Colorado Retail Food Establishment Rules and Regulations*.
- B. For pushcarts, the water supply tank must have a minimum capacity of at least five gallons.
- C. For mobile units equipped with a three-compartment warewashing sink, the water supply must be sized to adequately fill warewashing sinks at least every four hours of operation.
- D. The mobile unit must supply three gallons of water to each handwashing sink for each hour of operation. For example, a mobile unit operating for six hours must have a minimum of 18 gallons of drinking water available just for the hand sink. Water can be provided through additional food grade containers if approved by the Department.
- E. Adequate water pressure must be provided to all fixtures at all times.
- F. Only food-grade hoses can be used to fill or transfer drinking water to or within a mobile unit.

IV. WASTEWATER

- A. All wastewater (except water from clean ice) must be contained in a permanently installed holding tank that is at least 15% larger than the water supply tank.
- B. Wastewater from the holding tank must be disposed in an approved sanitary sewer system (e.g. toilet or plumbed drain) daily. The wastewater holding tank must never be emptied onto the ground or in the storm drainage system.
- C. When using wastewater containers that are not attached to the unit, they must be clearly marked and used for no other purpose.

- D. All connections to the wastewater holding tank must be of a different size or type than the connections to the water supply tank in order to prevent a cross-connection between drinking water and wastewater.
- E. The connections that release or catch wastewater must be located below the connections on the water supply tank in order to prevent contamination of the supply tank.

V. DEFINITIONS

- A. Mobile Retail Food Establishment: Means a retail food establishment that is a wheeled vehicle or trailer that is readily moveable and designed for the service of food from the *interior* of the unit that is intended to physically report to and operate from a commissary for servicing, restocking, and maintenance each operating day.
- B. Push Cart: Means a retail food establishment that is a non-motorized unit designed so foods are served from the *exterior* of the unit, which is intended to physically report to and operate from a commissary for servicing, restocking and maintenance each operating day. Pushcarts shall be limited to cooking approved menu items and serving commercially prepared or commissary prepared food that will result in simple assembly.
- C. Self-Contained Mobile Unit: Means a licensed mobile retail food establishment that is approved to operate without a commissary. It is not connected to fixed utilities (i.e. water, sewer, and electricity) and it is required to report to an approved servicing location for sewage disposal and water.

Additional Requirements for Self-Contained Mobile Retail Food Establishments

NOTE: Mobile retail food establishments must use a commissary unless:

- A. A pre-approved facility is provided and used to supply drinking water to the unit and for the disposal of wastewater generated by the unit.
- B. The mobile unit's drinking water system and waste retention system is sufficiently sized, operated properly to serve the needs of the unit, and liquid waste is emptied only at service locations that have been approved by the Department.
- C. Adequate storage areas are provided within the mobile unit for all food, dry goods, single-service articles, and cleaning supplies.
- D. Adequate facilities are provided for food preparation; cleaning and sanitizing of equipment and utensils; storage of additional food, equipment, utensils, and other supplies; and other servicing operations.
- E. Adequate facilities, as required by the menu, are provided, including hand sink, food preparation sink, ware-washing facilities, mop sink, mechanical refrigeration, and any other necessary equipment.
- F. A written operational plan is submitted for the mobile unit demonstrating that its operation as a self-contained unit can be accomplished in compliance with the Colorado Retail Food Establishment Rules and Regulations. Review and approval of the operational plan must include the menu and standard operating procedures for the unit. After an operational plan is approved, any additions or changes to the plan must be approved by the Department prior to implementation. The approved operational plan must be available on the mobile unit at all times.