



AMARILLO AREA PUBLIC HEALTH DISTRICT

Cities of Amarillo, Canyon, the Villages of Timbercreek Canyon, Lake Tanglewood, Palisades, the Town of Bishop Hills, and Potter and Randall County
 CITY OF AMARILLO, P. O. Box 1971, Amarillo, TX, 79105-1971
 Email: ehhealth@amarillo.gov

Mobile Food Unit (MFU) Plan Review Guide

<u>Establishment Contact Information:</u>	<u>Owner's Contact Information:</u>
Name: _____	Name: _____
Physical Address: _____	Physical Address: _____
Mailing Address: _____	Mailing Address: _____
Phone Number: _____	Phone Number: _____
Email: _____	Email: _____
<u>Establishment Details:</u>	
Total Square Footage: _____	
Number of Staff: Day Shift: _____	Night Shift: _____
Hours of Operation: Sunday: _____	Monday: _____
Tuesday: _____	Wednesday: _____
Thursday: _____	Friday: _____
Saturday: _____	
Vehicle License # _____	
Driver's License # _____	
Stand Alone Mobile Food Unit <input type="checkbox"/>	Mobile Food Unit/Commissary <input type="checkbox"/>

Comments: _____

Food Supplies:

Where will you obtain all food supplies from and how will they be transported to the unit?

1. What are the projected frequencies of delivers for:

Frozen Foods: _____ Refrigerated Foods: _____ Dry Storage: _____

2. How many pieces of equipment do you have for the following:

Freezers: _____ Coolers: _____ Hot holding units: _____

Cold Storage: NA

- 1. Does the establishment have an adequate and approved commercial refrigerator and freezer available to store cold foods below 41°F, and to maintain frozen foods frozen? Yes No NA
- 2. Does each refrigerator/freezer have a thermometer? Yes No NA
- 3. Is there a bulk ice machine available? Yes No

Preparation:

Cooling

Briefly describe your process and what food items will be used:

Reheating

Briefly describe your process and what food items will be used:

Time as a Public Health Control- standard operating procedure must be submitted w/application

Briefly describe your process and what food items will be used:

Non-Continuous (partial) cooking-standard operating procedure must be submitted w/application

Briefly describe your process and what food items will be used:

Date marking of food items

Briefly describe your process and what food items will be used:

Will specialized processing methods such as vacuum packaging of food items or curing of meats be conducted on-site?

Yes No

**If yes, which process?*

**Attach a copy of HACCP plan for each process*

Finish Schedule:

Applicant must indicate which materials (quarry tile, stainless steel, 4" plastic covered molding, vinyl coated ceiling panels, etc.) will be used in the following areas. **NOTE** No utility service lines and/or pipes may be unnecessarily exposed****

<u>Location</u>	<u>Floor</u>	<u>Coving</u>	<u>Walls</u>	<u>Ceiling</u>
Mobile Food Unit				

** If additional room is needed place an asterisk in the chart above and explain on an additional sheet**

Do employees have access to a restroom?

Yes

No

If so, where is the restroom located? _____

Insect & Rodent Control:

- 1. Will all outside doors be tight-fitting and self-closing? Yes No
- 2. Will fly screens be provided on all entrances are left open? Yes No
- 3. Will area around the building be free from unnecessary litter? Yes No
- 4. Will air curtains be used? Yes No

Garbage & Refuse:

Inside

- 1. Do all containers have lids? Yes No
- 2. Will refuse be stored inside? Yes No
- 3. Is there an area designated for garbage can or floor mat cleaning? Yes No NA

Outside

- 4. Will a dumpster be used? Contractor: _____ Yes No
- 5. Describe the location and surface where all dumpsters/compactors/grease storage receptacle will be stored: _____

Plumbing Connections: (Connection to the sewer line)

<u>Equipment</u>		<u>Air Gap</u>	<u>Air Break</u>	<u>Direct Connection</u>
1. Ice Machines	NA <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Sinks		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Handwashing		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. 3 Compartment		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Steam Tables	NA <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Water Supply:

- Is the water supply public or private? Public (Municipal) Private Well
- If private, has source been approved? Yes No
- Is ice made on premises or purchased commercially? On Premise Purchased NA
- Is hot water, at least 100°F, available at all hand washing facilities? **Please initial if read:** _____
- Is the MFU’s potable water tank made of a safe, durable, corrosion-resistant, non-absorbent material, finished to have a smooth, easily cleanable surface and labeled “Potable Water”? Tank size: _____ Yes No
- Is the potable water tank inlet ¾ “or less in diameter? Yes No
- Is there a food grade hose available and it is labeled “Potable Water”? Yes No
- Where will you obtain your potable water from? _____

Sewage Disposal:

- Is the waste water holding tank leak proof and sized at least 15% larger in capacity than the total fresh water capacity (potable water tank and water heater)? Tank size: _____ Yes No
- Is the waste water holding tank slopped to a drain that is at least 1” in diameter, equipped with a shut-off valve and labeled “Waste Water”? Yes No
- Is there a vent on the waste water tank plumbed up and outside of the unit with a minimum pipe diameter of 1^{1/2}”? Yes No
- Is a grease trap provided on the unit? Yes No

Grease Trap is required for all Mobile units. Please initial once read: _____

- Who is the manufacturer of the grease trap? _____
- What is the size of the grease trap? _____
- Describe the cleaning and maintenance schedule: _____

General:

- 1. Is the MFU readily movable? Yes No
- 2. A letter of permission to be parked on private property must be obtained from the owner and kept on the mobile unit during operation hours: Please initial if read: _____
- 3. Does the MFU have access to a generator or electricity at all times? Yes No

Warewashing Facilities:

- 1. Does the largest dish/utensil fit into each compartment of the 3 compartment sink? Yes No
- 2. If no, what is the procedure for manual cleaning and sanitizing? _____

- 3. What type of sanitizer is going to be used?

Chlorine Quat. Iodine Hot Water(170°F +) Other:

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

Servicing Area & Operation:

- 1. If the MFU reports to a commissary, where is it located at? _____ NA
- 2. Does the commissary have overhead protection for supplying, cleaning and servicing? Yes No
- 3. If the MFU is "stand alone", where is your servicing center located at? _____
- 4. Does the servicing area have a separate location for flushing and drainage of liquid wastes? Yes No
- 5. Is the surface of the servicing area constructed of a smooth, nonabsorbent material, such as concrete or machine-laid asphalt and maintained in good repair, kept clean and graded to drain? Yes No
- 6. Is the potable water servicing equipment installed in the servicing area according to the Plumbing Code and handled in a way that protects the water and equipment from contamination? Yes No
- 7. Where will the MFU be stored while not in operation? MFU shall not be parked or operated from a private residence

Statement: I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior permission from City of Amarillo Developmental Services Office may nullify final approval.

<u>Applicant Information:</u>	
Name:	_____
Phone Number:	_____
Email:	_____
Signature:	_____ Date: _____

Owner(s) or responsible representative(s)

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 by federal, state, or local government. It further does not constitute endorsement or acceptance of the completed establishment (structure or equipment). A pre-opening 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.