

MOBILE FOOD UNIT CHECKLIST

ALL MOBILE FOOD UNIT PAPERWORK VERIFICATION & PERMITTING INSPECTIONS BY APPOINTMENT ONLY STARTING SEPTEMBER 1, 2023.

- □ Completed Application
 - Including copy of Texas Sales Tax & Use Permit
- □ Completed Commissary Certification Form
- □ Completed Commissary Agreement
- □ Copy of Commissary Food Service Permit
- □ Copy of Commissary Last Inspection Report
- □ Vehicle has Registration Tags & License Plate on Unit
- □ Food Manager Certification Copy
 - One per unit required
 - Not required for Snow Cone only units
- Menu
- □ Completed Location & Operating Hours Form
- □ Power Source (e.g. Generator)

Mobile Food Unit Operator Must Ensure

- $\hfill\square$ No home prepared foods or food storage at a home residence
- □ Public Restroom pre-identified and easily accessible for employees
- Food Handler Certifications
 - All employees except Certified Food Manger

No Permit Required for

1. Commercial prepackaged non-TCS items and prepackaged hard frozen ice cream



MOBILE FOOD UNIT APPLICATION

		Appli	cation Date	
Vehicle Information				
Name Of Mobile Food Unit (as appears of	on unit/ DBA)			
Contact Phone Number				
Texas sales and use tax permit number				
Mobile Food Unit Type - Choose one that	it best fits your operatio	on		
[] Prepackaged Food (Example: pre-wra	apped food items hot o	r cold)		
[] Open Food Preparation (Example: sn	ow cone, open food di	spensed, food cook to	serve)	
[] Open Food Push Cart (Example: Hot	dogs)			
Application and fee are only valid for 180 pass inspection in that time period must	-	-	ile food unit that fails t	io
Owner Information				
Legal Name of Business Ownership		Phone Nu	mber	
Address	City	State	Zip	
Email				
Mailing Information				
Care of		Phone Numl	per	
Address				
Applicant Information				
[] Owner [] Responsible Party				
Applicant name (Print)	Applic	ant Signature		
FOR OFFICE USE ONLY (check each box if su Texas Sales Tax ID [] Commissary Agreement Commissary Certification [] Food Manager Certi Locations (If applicable) [] Menu [] License Plat	[] Commissary Permit [] C ification [] Food Handler C			
Mobile Food Unit Fee [] Prepackaged food - \$400 [] Open Prepackaged food - \$400	paration - \$600 [] P	ush cart - \$600		
Site # Effective Date				
1101 S. I MFU PACKET 072023	Tarrant County Publi Main St., Suite 2300, F 817-248-6299	ort Worth, TX 76104		

Commissary Certification

*MUST BE COMPLETED BY COMMISSARY HEALTH AUTHORITY

Any vendor that applies for a Tarrant County Public Health Mobile Food Unit Permit will be required to use a permitted commissary and must submit this form along with all required paperwork.

	Please check one					
	Permitted with Tarrant County []	Not Permitted with Tarrant County []				
	Commis	sary Name				
	Commissary/ Food Establishr	nent Owner or Responsible Party				
	CONTROL OF	UNTE				
	Commissary/ Food	Establishment Address				
Cor	nmissary/Food Establishment Permit Number	Commissary/Food Establishment Permit Expiration				
handle water t commi	the required commissary needs of a Mobile Fo tanks disposal of wastewater, cleaning of equip	neets the minimum requirements of this jurisdiction to od Unit, cleaning and service operations, including filling nent and utensils, and storage of supplies. This (central preparation facility/servicing area) as described apter 228.				
APPR	OVED []	1.1				
NOT A	PPROVED[] PUDIC	Health				
_	Name of Health Authority or Designee (Print)	Name of Health Jurisdiction				
_	Health Authority or Designee (Signature)	Contact Phone / email				

Commissary Agreement

I agree to report to the commissary facility listed below each operational day for all cleaning and service operations, including filling water tanks disposal of wastewater, cleaning of equipment and utensils, storage of supplies and food. I further agree to obtain all supplies and food from an approved source. This commissary facility meets all criteria for a commissary as described in the current Texas Administrative Code, Title 25, Chapter 228.

MOBILE FOOD UNIT DOING BUSINESS AS

(Legal Name of Business):
OWNER
(Owner of the Mobile Food Unit or Pushcart):
Name:
Signature: Date:
I agree to provide commissary services for the above mobile food unit. My commissary facility meets all commissary criteria outlined in the current Texas Administrative Code, Title 25, Chapter 228.
BUSINESS NAME
(Name of commissary):
PERMIT NUMBER:
BILLING ADDRESS:
CITY ZIP CODE
PHONE NUMBER
EMAIL
SIGNATURE
TITLE: [] Owner or [] Responsible Party

LOCATION(S) & MENU

(Any changes to menu or operational locations must be submitted to our office)

Name of Mobile Food Unit:LICENSE PLATE#		
OPEN FOOD [] PUSH CART []	PREPACKAGED []	
List all locations(addresses) where	e the Mobile Food Unit will op	perate for more than 1 hour:
ADDRESS	DAYS	HOURS
(ex: 1101 S Main Fort Worth)	(M, T, W, Th, F, Sa, Su)	(ex: 1 p.m 2 p.m.)
Location 1:	Days of operation:	Hours at location:
Location 2:	Days of operation:	Hours at location:
Location 3:	Days of operation:	Hours at location:
Location 4:	Days of operation:	Hours at location:
Any other locations where you will ge	nerally operate more than 1 ho	our, please only provide the street number
street name and city here		

MENU -- Provide all menu items below or attach a menu for review. TYPES OF MENU ITEMS (Ex: Tacos, Hamburgers, Loaded French Fries, Hot Dogs, Barbecue etc.)

PROTEINS (Ex: Beef, Ground Beef, Brisket, Chicken, Wings, Pork, Bacon, Fish, Shrimp, etc.)

* * * *

FRUITS & VEGETABLES (Ex: Chopped Lettuce, Cabbage, Diced Tomatoes, Cut Melons, etc.)

BREADS & GRAINS (Ex: Tortillas, Hamburger Buns, Rice, Quinoa, etc.)

CONDIMENTS & SAUCES (Ex: Sour Cream, Salsa, Mayonnaise, Butter, etc.)



MOBILE FOOD UNIT MINIMUM REQUIREMENTS

A Mobile Food Unit is required to follow all criteria for a Mobile Food Unit as described in the current Texas Administrative Code, Title 25, Chapter 228. The following are commonly observed not in compliance that may prevent the unit from being permitted.

- 15 Gallon minimum potable water under pressure, hot and cold water provided and labeled (inlet 3/4" or less used for no other purpose, pumps and hoses prevented from backflow)
 - Pushcarts **only**: 5 Gallon minimum potable water tank
- Liquid waste tank 15% greater than potable water tank and labeled
 - Tank must be sloped to drain 1" diameter or greater with shut off valve
- Hand sink with hot and cold water
 - o Including soap and paper towels for hand washing
 - Hot water must reach a minimum of 100°F at hand sink
- Three-compartment sink with drainage board or rack with hot and cold water
 - Hot water must reach minimum of 110°F at three compartment sink
- Food contact and non-food contact surfaces cleanable, smooth, durable and nonabsorbent including walls, floors, ceiling
- Refrigeration able to maintain 41°F or lower
- Hot holding units able to maintain 135°F or above
- Pass thru window, doors and other openings protected from pest entry
- All chemicals & cleaning supplies must be approved for food service usage. Must be stored properly & labeled with appropriate test strips for sanitizers
- Lighting shall be shielded and provide adequate illumination
- Food, food containers, and serving articles stored properly
- Thermometers in cold food storage areas
- Stem thermometer (0°- 220° F), not required for Snow Cone vendors with no TCS foods
- Covered trash receptacle must be provided for use by public
- Single-service articles properly stored