



Public Health

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

- 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

Tarrant County Public Health
1101 S. Main St., Suite 2300, Fort Worth, TX 76104
817-248-6299



Public Health

MOBILE FOOD UNIT APPLICATION

Application Date _____

Vehicle Information

Name Of Mobile Food Unit (as appears on unit/ DBA) _____

Contact Phone Number _____ License Plate # _____

Texas sales and use tax permit number _____

Mobile Food Unit Type - Choose one that best fits your operation

Prepackaged Food (Example: pre-wrapped food items hot or cold)

Open Food Preparation (Example: snow cone, open food dispensed, food cook to serve)

Open Food Push Cart (Example: Hot dogs)

Application and fee are only valid for 180 days from initial submittal/inspection, a mobile food unit that fails to pass inspection in that time period must resubmit application and new fee.

Owner Information

Legal Name of Business Ownership _____ Phone Number _____

Address _____ City _____ State _____ Zip _____

Email _____

Mailing Information

Care of _____ Phone Number _____

Address _____ City _____ State _____ Zip _____

Applicant Information

Owner Responsible Party

Applicant name (Print) _____ Applicant Signature _____

FOR OFFICE USE ONLY (check each box if submitted with application)

Texas Sales Tax ID Commissary Agreement Commissary Permit Commissary Most Recent Inspection

Commissary Certification Food Manager Certification Food Handler Certifications Hours Days

Locations (If applicable) Menu License Plate

Mobile Food Unit Fee

Prepackaged food - \$400 Open Preparation - \$600 Push cart - \$600

Site # _____ Effective Date _____

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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 []

Commissary Name

Commissary/ Food Establishment Owner or Responsible Party

Commissary/ Food Establishment Address

Commissary/Food Establishment Permit Number Commissary/Food Establishment Permit Expiration

I certify that the permitted establishment listed above meets the minimum requirements of this jurisdiction to handle the required commissary needs of a Mobile Food Unit, cleaning and service operations, including filling water tanks disposal of wastewater, cleaning of equipment and utensils, and storage of supplies. This commissary facility meets all criteria for a commissary (central preparation facility/servicing area) as described in the current Texas Administrative Code, Title 25, Chapter 228.

APPROVED []

NOT APPROVED []

Public Health

Name of Health Authority or Designee (Print)

Name of Health Jurisdiction

Health Authority or Designee (Signature)

Contact Phone / email

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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 _____ STATE _____ ZIP CODE _____

PHONE NUMBER _____

EMAIL _____

NAME _____

SIGNATURE _____

TITLE: [] Owner or [] Responsible Party

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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 the Mobile Food Unit will operate for more than 1 hour:

ADDRESS (ex: 1101 S Main Fort Worth)	DAYS (M, T, W, Th, F, Sa, Su)	HOURS (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 generally operate more than 1 hour, 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.)



Public Health

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
 - 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 non-absorbent 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

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