

Madison County Health Department Environmental Health

5707 US HWY 25/70 Suite 26 ◊ Marshall, NC 28753 ◊
 Tel: 828-649-9598 ◊ Fax: 828-649-9370 ◊
 envhealth@madisoncountync.gov

Tammy Cody, MHS Health Director Melissa Robertson, MD Medical Director

Mobile Food Unit/Pushcart Plan Review Application

This application must be completed and submitted to Madison County Environmental Health. A fee of \$125.00 (commissary is previously permitted) or \$175.00 (commissary is not previously permitted), will be assessed to owner/operator and must be paid with the submission of the application. Upon review, an Environmental Health Specialist will contact you concerning your application status via letter and/or email. Please also note: *No food preparation shall occur prior to receiving a permit from Madison County Environmental Health*

Type of Permit Request

Approval of food items being presence of mandatory equi	ood establishment or pushcart doing prepared and sold off a mobilipment located upon the unit and for minimum construction and	le food unit is directl l/or at the affiliated c	y proportional to the commissary. Reference
the preparation of hot dogs pre-packaged food items pr	ce of equipment or vehicle used and similar pre-cooked encased epared at approved commissary 18A .2671 for minimum constr	meats along with the and pre-packaged d	eir associated condiments rinks and snacks.
Applicant Name (please	orint):		
Mailing Address:S			
Phone (Business):	treet C	ity	State Zip
Email Address:			
Proposed Name of Mobil	e Food Unit/Pushcart:		
Proposed Commissary: _			
Address:			
Street	City	State	e Zip
Phone:	Owner/Manage	er's Name:	

Mobile Food Unit or Pushcart Checklist

The following items must be included along with this new application. Incomplete applications will be returned to the applicant and will result in the delay of Department's review, processing, and approval.

- -Completed mobile food unit and pushcart application (this application)
- -Scaled diagram showing positioning of equipment and sinks (mobile food units only)
- -Manufacturer specifications for all installed equipment upon the mobile food unit or pushcart
- -Complete and accurate menu for proposed mobile food unit or pushcart (including all food, drinks and condiments)
- -Completed commissary approval form

For Pushcarts Only: Provide copy of manufacturer specification for commercial carts or a detailed diagram of cart showing cold and hot holding equipment, food and product storage areas, cooking equipment, and manner of overhead protection of work areas from public.

For Mobile Food Units Only:

Please define the finish materials applied to each of the following as applicable (i.e. tile, stainless steel, FRP board, etc.)

	Floors:		
	Walls:		
	Ceiling:		
	Baseboards:		
	Countertops:		
	Shelves/cabinets:		
Opera			
	Primary County:		
	Days and Hours of Operation:		
	Projected number of meals to be served:		
	Breakfast:	Lunch:	Dinner

List all food service equipment and attach a copy of manufact	cturer equipment specifications
for:	

1.	Cooking Equipment (fryer, grill, convection, and induction cooking, etc.):			
2.	old food and beverage holding equipment (refrigerator, freezer, insulated cooler, etc): ot food and beverage holding equipment (steam table, heat lamp, insulated thermal container, e.):			
3.				
4.	Ware-wash sink: Number and size of sink basin(s) / (length x width x depth)?			
	Number and size of drain boards or adjacent shelving space for air drying of utensils?			
Water	· supply:			
1.	Wastewater storage tank – location, capacity (gallons) and construction materials for permanently mounted wastewater storage tank?			
	Note: The wastewater storage tank must be at least 15% larger than the water supply tank. The wastewater tank connection must be lower than and of a different design than the connection for the potable water inlet.			
2.	Potable water storage tank – location, capacity (gallons) and construction materials for potable water holding tank?			
	Note: The water inlet must be protected from contamination.			
3.	Water heater – attach copy of manufacturer specification for water heater			

Applicant Signature:

STATEMENT: I hereby certify that the information provided herein is accurate to the best of my knowledge. I understand that:

- The Madison County Health Department does not issue verbal approvals regarding construction, design, or permitting of pushcarts and mobile food units.
- Mobile food units and pushcarts which are found to be non-compliant with the
 design standards as prescribed within "Rules Governing the Food Protection and
 Sanitation of Food Establishments," 15A NCAC 18A .2600, will not receive an
 operational permit from this office.
- Any deviation of this application after receiving Department approval may result in the delay or denial of an operational permit. Approval of this application or issuance of an operating permit by the Madison County Health Department does not constitute compliance with other codes, laws, regulations, and ordinances imposed by another regulatory authority having jurisdiction.

Signature:		Date:	
	(Mobile Food Unit/Pushcart Applicant/Owner)		

This application must be submitted with Commissary Application to:

Madison County Health Department Environmental Health 5707 US HWY 25/70, Unit E, Suite 26, Marshall, NC 28753 • Phone: (828) 649-9598 Or

Email to envhealth@madisoncountync.gov