

ITINERANT FOOD VENDOR APPLICATION

Please review and provide the requested information for your establishment. Incomplete or unpaid applications will delay your license. Any license issued pursuant to this application will be subject to applicable State and Ledge Light Health District Food Establishment Regulations. Licenses are not transferable.

Name of Operation: _____

Phone Number of Operation: _____

Name of Legal Owner of Establishment: _____

Address for Legal Notices: _____

Email Address for Public Health Alerts: _____

Phone Number for 24-hour Emergency Contact: (Cell preferred) _____

Location Where Food is Prepared: Onsite Base Kitchen (see Base Kitchen Declaration form)

Primary Location of Vending (Site and Town/City): _____

Water Source: Public Well (provide recent water test) Bottled Source (Poland Spring, Dasani, etc.)

Fresh Water Holding Tanks: Size: _____ Construction materials: _____

Equipped with Waste Water Holding Tanks: Yes _____ gallons No

Location Where Waste Water is Disposed: Public Sewer Private Hauler Service Water Treatment Facility

Vending Vehicle(s) Registration #: _____ Make: _____ Model: _____ Color: _____

Operational Period: Year Round Seasonal from (6 months or less) _____ to _____

Class II, III and IV Only: Certified Food Protection Manager (CFPM): _____

Designated Alternate Person In Charge (PIC): _____

OVER



Promoting healthy communities

INCLUDE WITH YOUR COMPLETED APPLICATION:

- Payment (Make checks payable to Ledge Light Health District. There is a \$25 charge for all returned checks.)
- Copy of Proposed Menu
- Copy of CFPM Certification (ServSafe, National Registry, etc.)
- Site Plan of Mobile Vending Layout (See attached graph paper)
- Copy of Last Base Kitchen Inspection Report (see Base Kitchen Declaration Form)
- Copy of Recent Water Test (for well water only)

By signing, the applicant agrees the above information is accurate and agrees to comply with all aspects of the State of Connecticut and Ledge Light Health District Food Regulations. **This is not a permit; permits will be provided by mail and are require to be posted on the vending unit/catering unit.**

Applicant Signature: _____ Date: _____

Please Print Name: _____

****For guidance on mobile vending requirements, see Mobile Food Vendor Plan Review/Preoperational Checklist attached to end of this application****

Office Use Only:

Date paid: _____ Check Number: _____ Cash: _____ Credit Card: _____ Receipt #: _____

Classification: _____ CFPM Approved: Yes No N/a

Final Approval: _____ Date License Issued: _____
(Director of Health or Authorized Agent)

Non-engineered/Non-architectural Design for: _____ Scale: 1 square = _____ ft

HS – Hand sink **WW** – Ware Washing Sink **RR** – Reach-in Fridge **BM** – Bain Marie **WWT** – Waste Water Tank
WS – Water Supply **S** – Storage **ST** – Stove Top **FR** – Fryer **H** – Hood **BR** – Broiler Other:

Mobile Food Vendor Plan Review/Preoperational Checklist

- Mobile Food Vending Unit supplied with a potable water source (public water, well, bottled source)
- Mobile Food Vending Unit equipped with handwashing facilities supplied with hot and cold water, soap, drying device, covered waste bin
- Warewashing facilities available (3-bay sink, 2-bay sink, hot temp or chemical dish machine, Base Kitchen if applicable)
- All equipment shall be commercial grade, smooth, cleanable and durable
- Mobile Food Vending Unit is protected from the outdoors, screens provided
- Fresh Water holding tanks available
- Waste water holding tanks available
- Mobile Food Vending unit has an approved site for disposal of wastewater and grease (if applicable)
- All food prep and dispensing surfaces are smooth, durable, and cleanable
- All cold holding units available have a thermometer placed in the warmest part of the units
- If hot foods are being served, a thin probed digital food thermometer is available with alcohol wipes for sanitizing
- If cold and hot holding units are available in Mobile Food Vending Unit, cold food items are kept at 41°F (5°C) degrees or lower and hot food items kept at 135°F (57°C) degrees or higher
- Food grade sanitizer is available (chlorine bleach, quaternary ammonia, iodine) with appropriate sanitizer test strips
- All vehicles shall have the name and address of the person, firm or corporation responsible for the operation legibly printed on both sides of the vehicle.
- CFPM and PIC established and certificate available (for Class II, III, IV only)
- Submission of Mobile Food Vendor application with site plan of vending unit and copy of proposed menu
- Pre-operational inspection conducted by Ledge Light Health District
- Payment of License Fee (\$150-year round, \$75-seasonal)

***See attached fact sheets on Propane Tank and Food Truck Safety**