



TOWN OF BREWSTER
2198 MAIN STREET
BREWSTER, MA 02631
PHONE: (508) 896-3701 EXT 1120
FAX: (508) 896-4538
BRHEALTH@BREWSTER-MA.GOV

OFFICE OF
HEALTH DEPARTMENT

Mobile Food Establishment Plan Review Packet and Checklist

Name of Applicant: _____
Business Name: _____
Contact information: _____
Mailing address: _____
Phone number: _____ email: _____
Location of Commissary/Base of operations: _____
Proposed route or location of set-up: _____

Type of mobile food establishment unit:

_____ Self sufficient vehicle or trailer (fully enclosed, water and waste equipped)
_____ Not self sufficient vehicle or trailer (no water)
_____ Push cart or haul behind unit (not enclosed)

Please provide the following documents:

_____ An application for a mobile food establishment with proper fee
_____ A copy of a current Food Managers Certification
_____ A copy of a current Allergen Certification
_____ A copy of the permit to sell ice cream from a mobile unit from the Police Department (if applicable)
_____ A copy of the Base of Operations/Commissary Food Service Permit
_____ Proposed menu (includes beverages, dessert, prepackaged and prepared foods)
_____ Floor plan of unit or set up showing each area where food or beverages are stored, prepared, or served. Identify all floor mounted and table top equipment, sinks, water heaters, generators, pumps, water tanks, hoses. Include location or accessory items not located in mobile unit such as coolers.
_____ A picture of the actual mobile unit, set up
_____ A copy of Hawkers & Peddlers License
_____ A copy of the complete commissary agreement
_____ A copy of the complete toilet facility agreement (if applicable)
_____ A copy of the Zoning Board of approval for site location (if applicable)

Please note that all new mobile food application require a plan review meeting with the Food Inspector and an inspection of the mobile unit. Additionally, all new applications must be approved by the Board of Health at a regularly scheduled meeting, typically the first of each month. The Board of Health will not review incomplete applications.

Instructions:

This worksheet must be completed to the best of your ability and submitted to the Health Inspector for review prior to operating a Mobile Food Establishment (MFE)

List ALL food and beverage items to be prepared and/or served at the MFE. Attach a separate sheet if necessary. (Note: any changes to the menu must be submitted to and approved by the Health Department prior to their service.)

List ALL of the food and beverage items to be prepared at the Base of Operations.

Identify the sources for all food items. Include the source of the ice.

How will food temperatures be monitored at the MFE?

List the equipment and procedures that will be used at the MFE to maintain temperatures of PHF/TCS foods:

Specifically identify how ready-to-eat foods will be protected from raw foods of animal origin during storage, transportation, preparation by food workers, and cooking at the MFE:

How will food and related items that are not temperature sensitive (paper products, utensils, etc.) be stored at the MFE:

Describe the location and set-up of the hand washing facility to be used at the MFE:

Identify the source of potable water supply and describe how water will be provided to the MFE:

Identify how, how often, and how much water will be provided to the MFE. Specify the location, number and volume of any potable water tanks to be used. Describe the procedures for cleaning and refilling the tanks:

Identify the location, source and capacity of the hot water supply for the MFE:

Describe where utensil washing will take place. Describe where extra supplies of clean utensils will be stored:

Identify which sanitizer(s) will be used at the MFE and where they will be stored:

Describe how and where wastewater from hand washing and utensil washing will be collected, stored and disposed of. Specify the volume and location of the wastewater collection vessels and the procedures for emptying the tanks:

Identify the location of toilet facilities for the MFE workers:

Describe the number, location and types of garbage disposal containers at the MFE:

Identify how, when and where the garbage disposal containers will be emptied:

Describe the structure of the MFE (floors, walls, overhead protection, surfaces and general facilities for food protection):

Describe how electricity, gas, propane and other utilities will be provided to the MFE:

Please add any information about the MFE & base of operations that should be considered:

TYPES OF MOBILE FOOD ESTABLISHMENT UNITS (MFE)

The type of MFE unit must be identified during the application review process of the operation.

Self Sufficient Vehicle or Trailer:

These units are capable of preparing PHF and non-PHF foods, cooking, hot and cold storage, dry storage, utensil washing, hand washing, etc on the unit. The unit has a self –contained potable water supply, a wastewater storage system and may have mechanical refrigeration.

Vehicle or Trailer that is not Self-Sufficient:

These units are capable of dispensing hot and cold PHF and non-PHF foods. They may be capable of hot and cold holding of PHF foods, but may not have the facilities to cook or reheat food. These units have hand washing facilities, a potable water supply and containment for wastewater. They may not have utensil washing facilities. The servicing area may have to be used for cooking, re-heating food for hot-holding, cold and frozen food storage, dry goods storage, utensil washing, washing the MFE unit, access to potable water and the disposal of wastewater and garbage because this type of MFE may not have the facilities for conducting these activities.

Push Cart or Trailer:

These units are not self-propelled and must be hauled by a vehicle or pushed to move them from one location to another. These types of units offer limited PFH and non-PHF's. The units must be designed to safely service designated food items from the units. These units usually have accessory components such as coolers with ice for cold holding food. Hand washing stations must be built into the cart unless a portable hand washing station is allowed by the Health Department. Potable water must be available for food use and for hand washing. A wastewater containment system must be available and used. A servicing area must be available and used for cold and frozen food storage, dry goods storage, single-service/single-use storage, utensil storage, utensil washing, cart washing, access to potable water and the disposal of wastewater and garbage.

Pre-Packaged Push Carts:

These units are limited to ONLY offering commercially prepared, non-PHF's. A servicing area must be used as a site for food storage and cart cleaning.

Additionally, each MFE shall have its business name, address and telephone number of the person, firm or corporation responsible for its operation legibly printed in 3-inch high letters on at least two sides of the unit. The letters must be of a contrasting color from the color of the MFE unit.

BASE OF OPERATIONS/SERVICING AREA

The MFE unit must be operated in conjunction with a licensed, fixed-location food establishment, licensed wholesale food processing facility, or a wholesale distribution facility at which they obtain and/or store their food and clean their vehicles.

The MFE must report daily to its base of operations for such things as: storage and preparation facilities for food products (including refrigeration and cooking facilities); the supply of potable water; the availability of adequate plumbing and waste disposal; storage and cleaning facilities for equipment and utensils; storage and maintenance of other supplies; and personnel resources. The servicing area must be of such size and scope as to accommodate its own operation, as well as those of the MFE.

If the base of operation is a licensed food establishment, that establishment must own the mobile food unit. If the MFE is not owned by the licensed food establishment, the establishment must have a valid wholesale license *or* the owner of the MFE may obtain a separate license to operate within the fixed license establishment.

Potentially hazardous food can only be prepared from a self contained mobile food vehicle or trailer that is equipped with hot and cold running water. Mobile food operations not equipped with adequate water and waste system to facilitate hand-washing and the cleaning and sanitizing of utensils shall be limited to the preparation and service of frankfurters and non-potentially hazardous foods and to the sale of pre-packed food.

FOOD SOURCE:

All food must be obtained from sources that comply with the law. All meat and poultry must come from USDA or other acceptable government regulated approved sources. Food must be from an approved source.

Home canned foods are NOT allowed nor shall there be any home cooked or prepared foods offered at the MFE. Licensed residential kitchens are not allowed to sell food from an MFE. Ice for use as a food or a cooling medium shall be made from potable water and obtained from an approved source.

A private home may not be used for the storage of food or related items. Food and related items can only be stored on the secured MFE unit, at the servicing area, or at the commercial establishment from which it is purchased.

The source of food on MFEs must be in compliance with Sections 3-201, 3-202 and 3-203 of the Food Code.

Mobile food operators shall retain receipts or invoices which must indicate the name of the food item, the date purchased and the name of the approved food source if using a wholesale commissary such as BJ's.

FOOD PREPARATION:

All cooking and serving areas shall be protected from contamination. Open or uncovered working containers of food can be allowed at the MFE provided that the containers can be closed, covered, or otherwise protected after use or the structure of the MFE provides adequate protection. Cooking equipment must be segregated from public access. Patrons or other unauthorized individuals must be prohibited from accessing the food operation areas.

FOOD DISPLAY:

All food shall be protected from customer handling, coughing, sneezing or other contamination by wrapping, the use of food shields or other effective barriers. Condiments must be dispensed in single service type packaging, in pump-style dispensers, or in protected squeeze bottles, shakers or similar dispensers which prevent contamination of the food items by food workers, patrons, insects or other sources.

COOKING AND COOLING EQUIPMENT:

The cooking and reheating equipment used on the MFE must be capable of heating all of the PHF's offered from the MFE to their required cooking temperatures within two hours or less. If proper temperatures cannot be attained using the equipment on the MFE, then cooking and reheating must occur at the servicing area and will not be allowed on the MFE. Cooking equipment must be installed in accordance with the manufacturer's instructions. The local fire safety authority must approve all cooking devices and their location within the MFE.

All mobile food operations selling or distributing ready-to-eat PHF's shall be equipped with an insulated mechanically-refrigerated unit, powered by the vehicle on which it travels, to maintain foods at or below 41 degrees F. Wrapped ready-to-eat PHF's such as sandwiches shall not be stored in direct contact with ice.

Mechanical refrigeration or insulated containers with ice or gel packs can be used to maintain product temperature for all foods other than ready-to-eat PHF's. Storage of packaged food in contact with water or undrained ice is prohibited.



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Restroom Facility Agreement

Operators of mobile food operations shall obtain the use of adequate and suitable toilet facilities where hand washing facilities are available. 105 CMR 590.009 (B) (11)

The business named below must furnish written approval to the mobile food vendor at the time of the mobile food unit's initial licensing and each license renewal.

The business must allow the mobile food vendor employee (s) to use the restroom facilities of the business during the mobile vendor's hours of operations.

The restroom must be located within 200 feet of the mobile vending unit.

I _____ have read and understand the items of responsibility listed above and agree to
Business Owner or Responsible Party
Comply with all of the requirements. I give permission to _____ to use my
Mobile Food vendor
establishment, _____, located at _____,
Business Name Business Address
as their main restroom facility.

I understand that I _____ need to notify the Brewster Health Department
Business Owner/ Responsible Party
should I be unable to honor this agreement for any period of time, and that I _____
Mobile Food Vendor
need to find alternative arrangements and inform the Brewster Health Department in writing should such need arise. If
toilet facilities are found inadequate or do not meet minimum sanitation requirements, this agreement may be rescinded.

Signature of Business Owner/Responsible Party: _____
Title (owner/manager): _____ Date: _____
Phone number: _____ email: _____

Signature of Mobile Food Vending Unit Owner: _____
Date: _____ Phone Number: _____

Board of Health Approval: _____ Date: _____



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Use of Commissary Agreement Base of Operations

It is required that the operators of a Mobile Food unit have a base of operation from a licensed commissary/shared kitchen facility. According to the Massachusetts Department of Public Health, home kitchens are not allowed to be used as a base of operations for a mobile food establishment.

The kitchen is an essential part of a mobile food operation and must have facilities for supply storage, potable water, equipment cleaning and sanitizing, food preparation, effuse, water and grease disposal and other servicing activities. Food used on a mobile food unit shall not be stored at a home residence.

Base of operation information

Name of Business: _____
Address: _____ City/Town: _____ Zip: _____
Contact Person: _____ phone: _____
Title: _____ email: _____
Business Hours of Operation: _____

*Attach copy of current permit

Mobile unit/vendor information

Name of Business: _____
Address: _____ City/Town: _____ Zip: _____
Contact Person: _____ Phone: _____
Title: _____ email: _____
Location/route of vending: _____

Signatures

Base of Operation Owner/Agent: _____
Printed: _____ Date: _____

Mobile Vendor Owner/Agent: _____
Printed: _____ Date: _____

This agreement between the owner of the Base of Operations and the owner/vendor of the Mobil Food Unit operation signifies that both parties agree to the allowed use of the kitchen as specified. Note that this agreement is not transferable. Should there be a change in ownership of either the kitchen or mobile food unit, or should there be any modification or cancellation of this agreement between parties, then the Mobile Food Establishment Permit may be suspended.

Board of Health Approval: _____ Date: _____



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FEE \$85.00

MOBILE FOOD SERVICE APPLICATION

Contact Person/Applicant_____

Mailing Address_____

Name of Business/Organization_____Telephone_____

Base of Operations_____

Water Supply_____Waste Disposal_____

You are required to visit each department listed below and check if any licenses, approvals, inspections, etc. are needed. Please check off that you have visited each of the following:

_____ Board of Selectmen (liquor, common victual, Hawker & Peddler, town property use, etc.)

_____ Zoning (signs, usage, outdoor seating, etc)

_____ Planning

_____ Police (liquor, traffic, etc.)

_____ Building (tents, plumbing, electric, building, etc.)

_____ Fire (fire extinguishers, smoke detectors)

Proposed menu items

Supplier

Are all foods prepackaged in individual servings (excluding urn beverages and hot dogs)?_____

Is water provided on the unit?_____

Supply tank capacity_____Waste tank size_____

List toilet/hand washing facilities to be used along route_____

Method of cold storage_____Method of hot storage_____

Are signs with 3" letters, giving name and address, provided on both sides of unit?

Self contained units and pushcarts must obtain mobile food permits in each town in which they serve food.

All requests for new permits must go before the Board of Health for approval. The BOH usually meets the first Tuesday of the month. All paperwork must be submitted no later than 4:00PM one week prior to the meeting.

Please attach the following documents:

_____ Specification sheets on unit and accessory equipment

_____ Copy of vehicle registration

_____ Copy of Hawker and Peddlers License (obtained from State of MA and Board of Selectmen)

_____ Copy of base of operations food service permit