



LOW RISK MOBILE FOOD OPERATION PLAN REVIEW PACKET

(For all operators of Mobile Food Service Operations and Mobile Retail Food Establishments)

MOBILE FOOD OPERATION DEFINITION

"Mobile food operation" means a food operation that is operated from a movable vehicle, portable structure, or watercraft and that routinely changes location, except that if the operation remains at any one location for more than forty consecutive days, the operation is no longer a mobile food operation.

Low Risk Level Mobile: Low risk poses a potential risk to the public in terms of sanitation, food labeling, sources of food, and food storage practices in the mobile. Low risk activities include:

- Holding for sale or service pre-packaged refrigerated or frozen time/temperature controlled for safety foods;
- Offering for sale or serving pre-packaged non-time/temperature controlled for safety foods.

PLAN REVIEW SUBMISSION

Submit Plans To: Miami County Public Health (MCPH)
510 West Water Street Suite 130
Troy, Ohio 45373

Questions?
Phone: 937-573-3504
Email: EH@miamicountyhealth.net



PLAN REVIEW PROCESS

Step 1: Submit Plans

- All required documents shall be provided

Step 2: Plan Review Process

- Within 30 days of submission, MCPH will review the plans and contact you with an approval or disapproval
- Plans may require additional information or changes; changes must be implemented before approval
- Consultation (if requested)

Step 3: Plan Approval

- Once your plan is approved, you can proceed with construction or purchase of the unit or equipment

Step 4: Pre-license Inspection(s)

- The pre-license inspection is conducted to assess the facility prior to opening
- The facility must be fully operational upon inspection
- Additional changes to the facility may need to be implemented prior to issuance of the food license

Step 5: Pay for Food License

- After a successful pre-license inspection, you will fill out an application and pay for a food license
- Once payment has been processed your facility is approved to operate and the license will be sent in the mail

REQUIRED DOCUMENTATION (The review of plans cannot start without this documentation)

Place a checkmark in the box below to indicate that the required documentation have been included:

- ☐ One (1) complete set of drawings of the mobile layout with lighting plan (include support vehicles)
- ☐ Manufacturer's specification sheets for all equipment
- ☐ Menu including all food sources
- ☐ Bodily fluid clean-up procedure and kit*
- ☐ Signed employee illness policy*
- ☐ Pest control plan
- ☐ Copies of communication with the Ohio Department of Agriculture (ODA) or possession of an ODA registration demonstrating the *ability to store or prepare food in a facility other than the mobile unit*. (For questions regarding this registration, please reach out to the ODA's Division of Food Safety at (614) 728-6250.)

***Items asterisked are not required prior to opening, but required upon initial inspection**

MOBILE FOOD OPERATION PLAN REVIEW APPLICATION

Date: Name of Mobile: Name of Owner/Operator:

Address:

Telephone: Email:

Type of Unit (check one):

- Self-Sufficient Vehicle or Trailer
- Vehicle or Trailer is not Self-Sufficient (ex. Restaurant supported)
- Pushcart
- Other (please specify)

PLAN REVIEW COMPONENTS

Provide a drawing/layout of mobile unit that are a minimum of 11 x 14 inches in size including the layout of the floor plan accurately drawn to a minimum scale of 1/4 inch = 1 foot.

Show the proposed location and placement of all food equipment. Each piece of equipment must be clearly identified and referenced to the Equipment Schedule as applicable.

Please confirm by marking the following boxes that the plans include each item or write not applicable (N/A) next to the box:

- Lighting plan
- Information on Mobile's Exterior:
 - Name of the operation
 - City of origin (with individual lettering measuring at least three inches high and one inch wide)
 - Area code and telephone number
- Interior finish schedule
- Menu
- Facility Floor Plan, drawn to scale, to include:
 - Location of equipment
 - Location of dry goods, chemical storage, and personal belongings storage

INTERIOR FINISHES

Common Flooring Finishes: quarry tile, VCT, ceramic tile, poured seamless epoxy, sealed concrete

Common Wall Finishes: Fiberglass reinforced panels (FRP), stainless steel panels, ceramic tile

Common Ceiling Finishes: Plastic coated fiberboard, metal

Please fill surfaces in boxes below:

Floors	Walls	Ceilings	Cove Base

LIGHTING SCHEDULE

Confirm by marking the following boxes that this facility meets the requirements of the Ohio Administrative Rules or write not applicable (N/A) next to the box:

- At least 110 lux (10 foot-candles) at 30 inches above the floor, in walk-in refrigeration units and dry food storage areas.
- At least 220 lux (20 foot-candles) where food is provided for consumer self-service such as buffets and salad bars, or where fresh produce or packaged foods are sold or offered for consumption. Also, in all areas used for handwashing, warewashing, equipment/utensil storage, and in restrooms.
- At least 540 lux (50 foot-candles) at a surface where a food employee is working with food or working with utensils or equipment.
- Shatterproof light bulbs or shields/protectors are required on fixtures installed in all food preparation and warewashing areas, and where exposed foods are stored in any applicable pieces of equipment with the purpose of display, serving, etc.

FOOD MENU REVIEW (If Space is Limited, Please Attach Your Answer to the Question)

- List all food and drink items intended for preparation and/or service. If additional space is required, please include a separate sheet. (Please note that any modifications to the menu must be formally submitted and approved by the Miami County Public Health):
- Identify the sources of all food items (Include the source of ice if used):
- Will any foods be prepared at and stored off the mobile unit? If so, will an Ohio Department of Agriculture (ODA) license be obtained to distribute to the mobile unit?

- 4) Are you intending to store food within a building that you own? _____
- 5) Are you planning to store any items outside the mobile unit during events or at the serving locations for food? _____
- 6) If food or equipment are stored outside the mobile unit, how will they be safeguarded against contamination and adverse weather conditions and the ground? _____
- 7) Describe how dry goods will be stored off the floor: _____
- 8) If raw meats, poultry, and seafood will be stored in the same refrigerators/freezers as cooked and ready to eat foods, describe how cross contamination will be prevented: _____
- 9) Describe how cold foods will be maintained at 41°F or below: _____
- 10) Please specify the method, timing, and location for emptying the garbage disposal containers? _____
- 11) Explain the method by which power or electricity will be supplied to the mobile unit to ensure continuous cold storage for food items: _____
- 12) How will TCS foods be kept cold during the transportation of the mobile unit between events? _____
- 13) Will TCS be stored more than seven days in cold holding? _____
- 14) How will you date label refrigerated TCS food? _____
- 15) Will food be stored long-term in a freezer that isn't situated on the mobile or in another trailer? _____
- 16) Will food be stored in a freezer that is not located on the mobile or in another trailer? _____
- 17) What type of thermometers are being used for monitoring food temperatures? _____
- 18) According to Ohio law, in order for your mobile operation to obtain licensing through MCPH, it must have Miami County designated as its home base or the place where it is returned and serviced, essentially serving as its home address. Are you clear on this requirement?
☐ **Yes** ☐ **No**
- 19) Do you understand that if your food operation does not move from a single location for more than forty consecutive days, it loses its licensability as a mobile food operation? ☐ **Yes** ☐ **No**
- 20) Do you understand that your mobile unit cannot sell food or operate without being fully set up and functional (ex. electricity on)?
☐ **Yes** ☐ **No**
- 21) Would you like a meeting on-site at the existing facility (if applicable)? ☐ **Yes** ☐ **No**

MCPH OPERATION LICENSE FEE

Risk Level	Local Fee	State Fee	Total Annual License Fee
Low Risk Level	\$80.00	\$28.00	\$108.00

Continuation Sheet for Questions (if needed):

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.