

CITY OF NEW BRITAIN

DEPARTMENT OF BUILDING AND HEALTH SERGIO LUPO MPH, RS DIRECTOR WWW.NEWBRITAINCT.GOV

EST. 1871

PLAN REVIEW APPLICATION - MOBILE VENDOR FOOD SERVICE

Food service business name :
Name of owner(s) of business:
Mailing Address:
Home Address of owner if different
Owners Telephone number(s):(home)(cell)
Establishment phone number:
E-mail address:
Proposed class: \Box_{M1} \$90.00 \Box_{M2} \$125.00 \Box_{M3} \$170.00
Is the owner/operator a certified Qualified Food Operator? (QFO)? \Box_{yes} \Box_{no}
Name of approved examination for QFO
Plate Number of Mobile Unit:

NO HEALTH LICENSE WILL BE ISSUED UNTIL THE FOLLOWING SIGNATURES ARE OBTAINED WITH REFERENCE TO THE ABOVE MENTIONED PROJECT.

	Office Use Only
□ Assessor's Office (Rm 102):	Date Received:
□ <i>Tax Collector (Rm 104):</i>	Date Paid:
□ Fire marshal (Rm 309):	
□ Health Dept (Rm 404):	Amount paid:
	License Fee:
	□ _{cash} □ _{check} #

The following documents must be submitted for review:

Proposed	menu.
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Detailed plan of mobile unit drawn to scale, show location of equipment.

a. you may also submit photographs with the drawings

- Proposed equipment specifications.
- Provide a detailed list of proposed method of food processing including cooking on the mobile unit.
- Name and address of base of operations.
- Copy of food license and most recent food service inspection report.
- If your business has more than one vehicle or cart, each vendor must be identified.
- Notarized letter of approval for vending on private property.

There shall be no home cooking, no home preparation, and/or no home storage of food offered on mobile vendor units. All foods must be obtained from a licensed and permitted wholesaler or food distributor. Where is the food purchased?

Name and address of base of operations:

You may not use city trash cans to dispose of your refuse. You must bring a waste can with you for your customers and remove the refuse from the site. Discarding your refuse in city trash cans may result in a fine, a ticket or revocation of your permit.

Type of water supply? public water well

Mobile vendors on private water supply wells must submit a complete water analysis of a report from a state certified laboratory prior to the issuance of an annual license.

List all locations you will make in New Britain and the time of day you will be at those locations

Method of cooking on site (check all that apply):

steaming	blanching	roasting	🔲 grilling
smoking	□ stewing	barbeque	deep frying
boiling	sauteing	baking	
brazing	pan frying	broiling	

Foods for menu (check all that apply)

Fruit Vegetable	 commercially packaged & pre-washed commercially packaged & pre-washed washed and processed on site
Meat Fish Chicken Pork Eggs	rawcommercially packaged & pre-cookedprepared & cooked on siterawcommercially packaged & pre-cookedprepared & cooked on site
Describe ho Cut Mix Chop	ow you will process food on your mobile vendor unit (on site). Check all that apply:

Will special equipment be used to process these food products?

- $\Box_{\text{food processor}}$
- buffalo chopper
- blender
- Other

What is the source of the food to be dispensed? Provide the name and address of the food distribution facility.

Provide a detailed description of how foods sold on the mobile unit are prepared: (use a blank sheet of paper and add additional items and steps as needed).

Cold Foods Preparation steps

Hot Foods Preparation steps

List the food that will be made more than 4 hours in advance_____

List of foods that are leftover at the end of the business day:

How and where will you store the leftover food?______ How will you reheat leftover food?______

Equipment (check boxes that apply for all equipment installed on the mobile unit.)

grill	coffee maker	S
hot holding unit	soup warmer	c
deep fryer	oven	u
microwave	freezer	tł
hand wash sink	food prep sink	tł
on demand water pump	hot water heater	v

steamer (baine marie) cold prep table under counter refrigerator thermal box three component sink ventilation hood

What kind of thermometer will be used? How will they be sanitized?

How/where will utensils, pans, etc. be cleaned at the end of the day? Be specific.

Describe the method of handwashing used on the unit.

Describe how food will be protected. (Note: in large units where food is prepped inside, screening is required to prevent the entrance of insects).

Chemicals (name of sanitizing chemical you will use on mobile unit.)

Chlorine

Quaternary ammonium

Iodine

Water tank

How often is the water tank cleaned?

How do you clean the water tank?_____

You may not discard your wastewater into a storm drain or onto a street, or onto a driveway that runs into the street. Where do you dispose of the waste water?

Garbage (Dimensions [size] and brand of trash can you will have for your mobile vendor unit)

Where and how will you dispose of your garbage on the mobile vending unit?

Name and address of food vendor personnel		
Home mailing address:		
Telephone number (home):	(cell)	
E-mail:		
Name and address of food vendor personnel		
Home mailing address:		
Telephone number (home):	(cell)	
E-mail:		
Name and address of food vendor personnel		
Home mailing address:		
Telephone number (home):	(cell)	
E-mail:		

The undersigned agrees to comply with all regulations and ordinances enforced by the City of New Britain Department of Health. You must contact the Environmental Health Division at 860-612-1600 if you propose further changes in menu, equipment, facility, or any of the above referenced information.

Owner/O	perator	Signature	

_Date	