

A. Operator Information		
Name of Mobile Food Establishment (MFE)		
Name of Owner/Operator		
Mailing Address		
City	State	Zip Code
Phone No. ()	Alternative Phone No. ()	

B. Event Information
Possible Events Attending

C. Facility & Operations Information
1. Will ALL foods be prepared at the mobile site? YES NO If No please provide the name and address of the location where foods will be prepared. Home Prepared Food Is NOT Allowed.
2. Describe (be specific) how, frozen, cold, and hot foods will be transported.
3. How will food temperatures be monitored during the event?
4. Describe the location and set up of hand washing facilities to be used by the mobile workers.
5. Identify the source of the potable water supply serving your mobile and how it is to be supplied (RV hose, cooler container, etc.)
6. Will there be electricity provided to the mobile? If yes, will it be provided 24 hours?

**Mobile Food Service
Establishment Application**
Barry County Health Department
P.O. Box 207
Cassville, MO 65625
417-847-2114 FAX 417-847-2116
www.barrycountyhealth.com



C. Facility & Operations Information (continued)
7. Describe the floors, walls, and ceiling surfaces and lighting within the mobile. Describe how food will be protected during display/service from insects, dust consumers. Describe how food will be protected from weather (if using cart)?
8. Describe where utensil washing will take place. Describe the equipment and procedures you will use to wash, rinse, sanitize and air dry equipment, utensils and other food preparation surfaces.
9. List the type of sanitizer you will use (you must provide a kit to test the sanitizer concentration)
10. Describe how and where wastewater from utensil and hand washing will be collected, stored and disposed.
11. How will cleaners and other chemicals be stored in relation to food supplies and utensils?
12. Toilet Facilities Flush Portable What type of hand washing facilities is provided for these facilities?
13. Describe the number, location, and types of garbage disposal containers in the mobile.

D. Consumer Advisory

E. Drawing

2. List any foods or animal origin that will be served raw or undercooked.

Provide a drawing of the inside of the mobile. Identify and describe all equipment (including cooking and cold holding equipment), hand washing facilities, food and single service storage, garbage containers, equipment for customer self service and dispensing condiments.

1. For any raw or undercooked foods of animal origins, how will you notify your customers of the risk involved with these foods.

F. Food preparation

Food	Food Source	Thaw How? Where?	Cut/Wash Assemble Where?	Cold Holding How? Where? Food temp?	Cook How? Where? Food temp?	Cooling How? Time/Temp?	Hot Holding How? Where? Food temp?	Reheating How?	Handling Tongs, Utensils, Gloves, etc.

I have received a copy of the "Mobile Food Establishment Operations Check List"

Applicant's Signature

Date of Submission